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Sociological Factors Affecting Recruitment into the Nursing Profession

DR. REGINALD ARTHUR HENRY ROBSON

1964

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ROYAL COMMISSION ON HEALTH SERVICES

SOCIOLOGICAL FACTORS AFFECTING RECRUITMENT INTO THE NURSING PROFESSION

R.A.H. Robson

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Commission on Health Services does not
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PREFACE

The author wishes to acknowledge the invaluable assistance given by his research associate, Mr. Richard P. Boyle, in the undertaking of this research project. Mr. Boyle assumed the major responsibility for the interviewing of high school and nursing school students and for the computer program of analysis of all of the questionnaire and interview data. His contributions to all phases of the project have been substantial and his suggestions most useful in the preparation of this study.

INTRODUCTION

Insofar as the Commission will be considering proposals concerning the scope and nature of the health services in Canada both at the present time and in the future, it seemed to us that it would assist the Commission to have information concerning factors that affect the supply of manpower to administer these services. The focus of the present study was restricted to one of the medical services, namely the nursing profession, and its purpose was to ascertain which factors affect the entry of people into the nursing profession, the extent of their influence and the manner in which this influence is exerted on the supply of nurses.

There are three general classes of factors which affect the supply of nurses and which warrant special study, viz:

1. the career choices of potential entrance into schools of nursing (both boys and girls),
2. the policies of schools of nursing with regard to the recruitment and selection of student nurses,
3. losses from the nursing profession.

The last of the above classes of factors was not included in the concerns of the present study since this was to be dealt with in another separate project.

A. THE CAREER CHOICES OF POTENTIAL ENTRANCE INTO SCHOOLS OF NURSING

The number of people who plan to become nurses can be seen as the result of a process of selection between available alternative occupations. Each person is confronted with an array of occupations he or she can enter, some "choose" nursing and reject others, others reject nursing and "choose" alternative occupations. The term "choice" used here does not necessarily imply a conscious, "rational" process; it refers to the *result* of the operation of various factors on the individual, in the sense that he or she eventually enters one occupation rather than others, although the way in which these factors have led the person to enter that occupation may be understood by him or they may not. The answer to the question as to what factors determine whether a person plans to become a nurse or not must

take into account not only their attitudes towards nursing as an occupation, but also their attitudes towards other occupations. In other words, the supply of applicants for nursing school is affected by the rejection of nursing as an occupation and the acceptance of other occupations as well as by the acceptance of nursing and the rejection of alternatives. Our basic research design therefore was to compare those who plan to enter nursing with those who plan to enter other occupations in terms of those factors which we considered important in determining into which group a person would eventually fall.

When we began this project, we took the view that the process of occupational choice involved:

1. A set of “values” or desired objectives, ends or goals which may be perceived as being differentially mediated through different occupations. These values we classified into three broad groups:

a. “society-benefiting”, “family-benefiting”, or “self-benefiting”. We felt that individuals would differ with respect to their desire to have an occupation which could be seen as being of benefit to society; as facilitating the establishment of a particular kind of family, and finally as benefiting the self. For example: we suggest that a person planning to be a missionary is more likely than those choosing other occupations to do so because, among other things, he or she wants to have an occupation which is of benefit to society. Similarly, other occupations such as nursing, which could be seen as providing training which is useful in the establishment of a family, may be chosen because, so far as an occupation is concerned, girls value this objective more than that of benefiting society. Finally, the occupation of airline stewardess may be seen by those who choose it as benefiting the self by providing an opportunity for extensive travel, and thus influence them in their choice of this occupation.

b. “intrinsic” versus “extrinsic” values. It seemed to us that sometimes people choose an occupation primarily because of the attractions of the job itself (intrinsic values), while others choose an occupation because it is instrumental in achieving other ends (extrinsic values), such as income, prestige and security.

c. specific characteristics of the occupation. The acceptance or rejection of an occupation may be affected by the liking or disliking of one or more particular characteristics of that job. Such characteristics as shift work, travel, leaving home, the type of colleagues with whom one works and so on, may be either liked or disliked strongly enough to affect one’s attitude towards the acceptance or rejection of an occupation with these characteristics.

2. The perceptions of potential recruits concerning the extent to which various occupations facilitate these values or objectives. In other words, the choice of a particular occupation is not only a function of the kind of occupational objectives sought, but also of the individual’s perceptions of the extent to which various occupational alternatives will enable her to achieve these objectives. It is possible that different people will have different perceptions of the same occupations and thus choose different occupations to achieve the same objectives, or choose the same occupation to achieve different objectives.

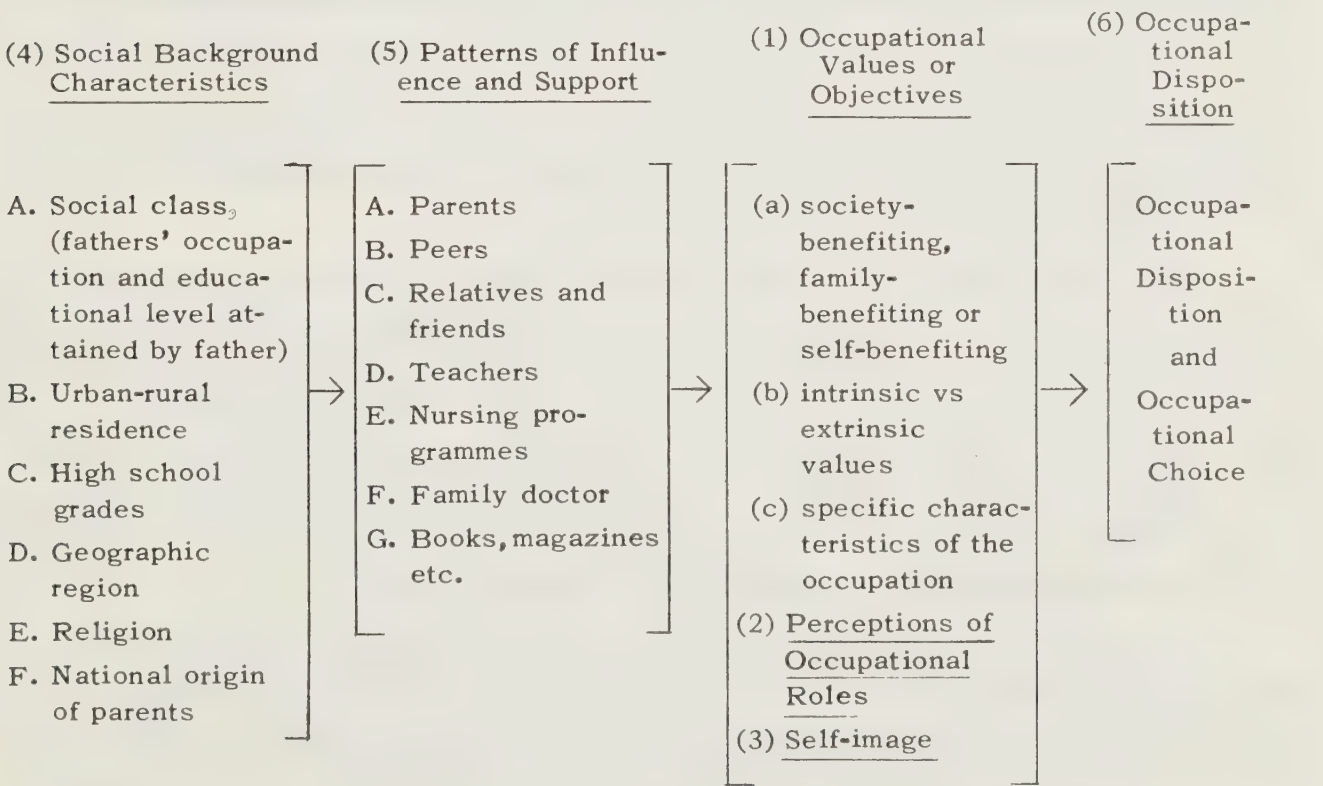
3. **Self-image.** Since different occupations require different skills and abilities, the choice of an occupation involves not only one's perception of the job requirements but also one's assessment of one's own ability to fill the occupational role. The elements of the self-image involved are not only the technical skills and ability required to perform the job adequately but also the kind of personality that one thinks is required by someone filling a particular occupational role. For example, one may see oneself as having the academic ability to be a teacher, but if one also sees a requirement of this role as being able to speak to and organize large groups of young people without feeling selfconscious, for a person who sees himself as being the kind of person who would be continuously embarrassed in such situations, such a self-image would constitute a barrier to entering this profession.

Our general view was that the above three classes of factors would affect occupational choice and that these would be a function of:

4. **Social background characteristics.** Such factors as the social class of parents, urban-rural residence, religion, geographic region, scholastic ability, and national origin of parents would determine the individual's occupational values or objectives, his perceptions of occupational roles and his self-image.

5. **Patterns of influence and support.** The sources of influence and support which we thought would affect the individual with respect to the three classes of variables were those of the parents, relatives and friends, teachers, peers and the mass media such as books and magazines. The kinds of influence and support which we thought were important were the provision of information, such as information about occupational roles, influence concerning self-image and attitudes towards various available occupations.

We may summarize our approach mentioned above diagrammatically as follows:



B. RECRUITMENT AND SELECTION POLICIES OF SCHOOLS OF NURSING

Schools of nursing may also affect the supply of nurses in at least two ways: (a) by embarking on a programme to recruit nurses, or by not doing so, and (b) by the use of a variety of selection procedures by which some applicants are accepted and others are rejected.

With respect to the first of these, we decided to ascertain to what extent schools of nursing undertake recruiting activities such as the distribution of literature to various groups in the community including schools, contacts with high school counsellors, and by making speeches to groups of students about the nursing profession. We also endeavoured to ascertain what effect such activities have on recruitment.

With regard to the second item above, we felt that it would be useful to obtain information concerning the proportions of applicants to schools of nursing that are accepted and rejected respectively and the criteria that are used in making this determination. Further, from the point of view of future planning, it would be important to know what problems schools of nursing experience both in recruiting and selecting an adequate supply of students of the standard they require. Do nursing schools, for example, have to reject students with requisite ability or do they experience difficulty in obtaining a sufficient number of worthy students?

C. GATHERING THE DATA

As mentioned earlier, our basic research design was to secure information with respect to the six broad classes of information outlined in the above diagram from potential recruits into the nursing profession, and to compare the responses, in connection with the first five, of those planning to enter nursing with those planning to enter other occupations. Our prediction was that the former would be different from the latter with respect to social class backgrounds, and patterns of influence and support, which would result in different occupational values, perceptions of occupational roles and self-image, and that these differences would then account for the difference in occupational choice.

Although the potential recruits into the nursing profession comprise both boys and girls, the number of men in the nursing profession and in schools of nursing is extremely small (about one-half of one per cent of those entering hospital schools of nursing in 1961 were men) and, in order to obtain a sufficient number of men who plan to enter the field of nursing so that we could make a similar comparison as that proposed for girls, it would have been necessary to select an extremely large sample. In the circumstances, we decided to treat the problem of male recruitment into the nursing profession separately (see Chapter VIII).

We therefore administered a questionnaire (see Appendix A) designed to elicit the required information to a sample of female high school students in their junior matricular year; this year was selected because we felt that by this time the vast majority of students would have chosen an occupation and the choice

would have been sufficiently recent to minimize problems of the subjects' remembering events connected with the choice. (See Appendix B for details of the sample used). It must be mentioned that, in choosing this group of female high school students, we eliminated from our sample those girls who left school before reaching junior matriculation year. Since these girls probably entered low status jobs, it means that our sample is under-represented in this category and over-represented in those with plans for further education after high school and in those planning to enter medium and high status occupations. This must be taken into account in interpreting the results of our research.

However, since we could not be sure that the high school students who said they wanted to become nurses would in fact do so, we also administered a similar questionnaire (see Appendix A) to a sample of first-year nursing students in hospital and university schools of nursing. We chose first-year students in order to minimize the bias resulting from faulty and/or selective memory and also bias arising from the fact that they had actually entered the nursing profession (see Appendix B for details of the sample used).

In addition to the questionnaire, we interviewed a sub-sample of the female high school students and nursing school students in order to obtain more detailed information particularly concerning the temporal process involved in occupational choice.

As mentioned earlier, we dealt separately with male high school students, and in order to test certain ideas we had concerning the attitude of this group to nursing as an occupation we administered a different questionnaire (see Appendix A) to a small sample of male high school students (see Appendix B for details of the sample used).

To secure information concerning the recruitment and selection policies of schools of nursing, interviews were undertaken of a sample of directors of schools of nursing.

SOCIAL BACKGROUND CHARACTERISTICS AND OCCUPATIONAL CHOICE

The general pattern of our analysis was first to see if there was any relationship between the social background characteristics and occupational choice, and then to take the two sets of “mediating variables”, namely, 1) occupational values, job perceptions and self-image, and 2) patterns of influence and support, and to investigate the relationships between these on the one hand and both social background characteristics and occupational choice on the other. In this chapter we shall examine the relationships between social background characteristics and occupational choice.

A. SOCIAL BACKGROUND AND OCCUPATIONAL CHOICE

The following table shows the proportions of girls in each social class planning to enter occupations with different degrees of status (see Appendix C for methods used to determine social class and status of occupation chosen):

TABLE 2:1
RELATIONSHIP BETWEEN SOCIAL CLASS OF PARENTS AND STATUS OF OCCUPATION CHOSEN

Social Class of Parents	N	High Status Occupations	Medium Status Occupations	Low Status Occupations	No Job Chosen	Total
Professional.....	171	47	45	4	5	100
White Collar Occupations	836	19	68	10	3	100
Blue Collar and Farm Occupations	1,319	10	71	17	2	100
No Response.....	251	15	71	12	2	100
Per cent of total	2,577	16	69	13	3	100

$X^2 = 181.0$; d.f. = 4; $P < .001$

This shows that girls from professional families are almost equally divided between those planning to enter high and medium status occupations, with only a very small percentage choosing low status occupations. About 70 per cent of those in both white collar and blue collar occupations plan to follow medium status occupations, but about twice as many daughters of white collar workers plan to enter

high status jobs as do those from blue collar and farm families, while almost twice as many of the latter group choose low status occupations as do girls from white collar families.

One final point of interest in the preceding table is the higher proportion of daughters of professional men who have not yet chosen an occupation, 5 per cent as against 2 per cent or 3 per cent for the other social classes. We suggest that the reason for this is the much larger proportion of girls from this class who plan to go to university, which gives them a further four years or so before a decision must be made with regard to their choice of occupation.

One of the principal factors accounting for the differences in the kinds of occupations chosen by girls from different social classes is that of their educational plans after high school. There is a relationship between the status classification of occupations chosen and the kind of training required for the jobs; high status occupations usually require university education and medium status jobs some vocational training, while low status jobs do not require any formal training beyond high school. It can be seen from Table 2:2 that there is a clear relationship between social class background and whether a girl plans to go to university, vocational school or neither after leaving high school.

TABLE 2:2
RELATIONSHIP BETWEEN SOCIAL CLASS OF PARENTS AND
EDUCATIONAL PLANS AFTER HIGH SCHOOL

Social Class of Parents:	N	Per Cent of Each Social Class with Education Plans after High School:								
		University		Vocational School		None		Plans Not Known		Total
1. Professional (with university education)	171	73	73	20	20	4	4	13	13	100
2. Professional (without univer- sity education)	183	31	35	37	38	20	16	12	10	100
3. Managerial (with more than high school).....	96	50		37		5		8		100
4. Managerial (with high school or less).....	287	39		36		14		11		100
5. Clerical and sales (with at least high school degree) ..	132	31	25	46	50	15	23	8	10	100
6. Clerical and sales (with less than high school degree)...	138	25		39		25		11		100
7. Service, occupations, crafts- men and skilled workers ...	611	22	18	48	50	23	23	7	10	100
8. Independent farmers	466	15		52		21		12		100
9. Unskilled workers (farm and non-farm)	242	14		49		27		11		100
No response.....	251	20		50		18		13		100
Per cent of total	2,577	28		45		27		10		100

X² = 288.6: d.f. = 16: P<.001

Seventy-three per cent of girls of professional class parents plan to go to university as compared to 35 per cent of girls in the white collar class and only 18 per cent of girls from blue collar and farm families. On the other hand, only 4 per cent of the professional class girls do not plan to receive any other formal education after high school, while 16 per cent and 23 per cent respectively of the girls in the other two classes fall into this category. Although it is possible that girls decide upon occupation first and then select the kind of education that is appropriate, it seems more plausible to us that, at least so far as university education is concerned, girls decide whether they will go to university or not and this decision affects the kind of occupational aspirations they develop.

We shall now take a look at the social class composition of those planning to enter nursing and also those planning to enter other occupations which we think have a special relevance to nursing, namely: other occupations concerned with health such as, 1) laboratory technician, 2) occupational therapists and physiotherapist, 3) practical nurses, 4) school teachers and 5) secretaries. These last two occupations were seen to be competitive with nursing since the educational standards required for entry into them are approximately the same as those for nursing.

First it is to be noted that roughly the same proportion of girls in each of the three social classes plan to enter the nursing profession, viz., approximately 20 per cent (Table 2:3). Nursing therefore does not appear to be any more attractive to girls of one social class than to those of any other. This equal attractiveness of nursing to girls of the three social classes is in contrast to our earlier finding that girls in the highest social class are not nearly as likely to choose medium status occupations in general as are those from the middle and lower classes. This means that among those upper class girls who choose medium status occupations, a higher proportion (about one-half) choose nursing than is the case for middle and lower class girls (about one-third and one-quarter respectively).

However, while the proportions from each social class planning to enter nursing are very similar, the social class composition of all girls choosing this career is quite varied, due to the substantial differences in the numbers of girls in each social class. The highest proportion of those planning to become nurses come from blue collar and farm families (48 per cent); 35 per cent come from families with white collar occupations, while only 7 per cent come from families of professional men.

If we now compare the social class backgrounds of girls choosing nursing with those planning to enter teaching and secretarial work, we find that, while about the same proportion (30 per cent) of these three occupations comes from the middle class composed of white collar workers, there are differences in the proportions of each occupation coming from the professional men and blue collar and farm workers. Secretarial work has a higher proportion of daughters of unskilled workers (60 per cent) than teaching (54 per cent) and both have a higher proportion of this class than nursing (47 per cent); similarly, secretarial work has a lower proportion of daughters of professional men (3 per cent) than teaching (4 per cent) and again, both have a lower proportion than nursing (7 per cent).

TABLE 2:3
RELATIONSHIP BETWEEN SOCIAL CLASS OF PARENTS AND OCCUPATION CHOSEN

Social Class of Parents:	N	Per Cent of Each Social Class Planning to Enter:										
		Occup'ls Therap'ls and Physio- therapists	Other High Status Occup'ns	Tea- chers	Nur- ses	Lab and X-ray Techn'n	Secre- taries	Other Medium Status Occup'ns	Prac- tical Nur- sing	Other Low Status Occup'ns	No Job Choice	Total
1. Professional (Social Class 1).....	171	6	40	15	21	1	5	4	1.8	2	5	100
2. White Collar Occupa- tions (Social Classes 2 to 6).....	836	2	17	23	23	5	11	7	0.2	9	3	100
3. Blue Collar and Farm Occupations (Social Classes 7 to 9).....	1,319	1	9	25	20	5	15	6	2.6	14	2	100
No Response	251	1	14	26	24	4	12	6	1.2	10	2	100
Per cent of total	2,577	2	14	24	21	5	13	6	1.6	11	3	100

$\chi^2 = 206.2$; d.f. = 16; $P < .001$

Over all, of the three occupations, the pattern for teachers is most like that for medium status occupations as a group, those going into secretarial work coming more frequently from the lower social classes and nurses coming more frequently from the higher social classes than other medium status occupations.

Finally, we turn to a comparison of nursing with other medical occupations. The social backgrounds of girls planning to become laboratory and X-ray technicians are most similar to those entering nursing, although there seems to be some reason to believe that they tend to come somewhat more often from the lower classes than the case for nursing. Occupational therapists and physiotherapists on the other hand are clearly more likely to come from the daughters of professional men than are those choosing nursing.

With regard to practical nursing, it is surprising to note that almost 2 per cent of daughters of professional men plan to enter this occupation, and yet almost no one from the following four classes selected these occupations. The only explanations we can offer for this are either that the term “practical nursing” was misunderstood by this particular group of girls, or that it results from the small numbers involved (1.8 per cent equals 3 girls). However, other than this peculiarity, the majority of those planning to become practical nurses come from the families of unskilled workers. It should be pointed out that the number of girls who selected the position of practical nursing was extremely small (42 out of 2,577).

B. URBAN/RURAL RESIDENCE AND OCCUPATIONAL CHOICE

Table 2:4 shows that the proportion of girls living in cities with a population of over 200,000 who plan to enter high status occupations is four times as great as the proportion from farms, while the proportion of girls living on farms who plan to enter low status occupations is almost two and a half times as great the proportion from large cities. Over all, it is clear that the larger the size of the town in which girls live, the higher the status of the occupation she plans to enter.

TABLE 2:4
RELATIONSHIP BETWEEN URBAN/RURAL RESIDENCE
AND STATUS OF OCCUPATION CHOSEN

Residence	N	Per Cent of Each Residential Area Choosing:				
		High Status Occupa- tions	Medium Status Occupa- tions	Low Status Occupa- tions	Unclassified and No Job Choice	Total
Cities over 200,000.....	630	28	61	8	1	100
Cities and Towns,..... between 4,000 – 200,000	659	17	69	12	1	100
Towns less than 4,000 ..	542	12	71	14	1	100
Farms Not in Towns	636	7	73	19	1	100
No Response	110	17	74	8	1	100
Per cent of total	2,577	16	69	13	1	100

$\chi^2 = 140.5$; d.f. = 9; $P < .001$

TABLE 2:5
RELATIONSHIP BETWEEN URBAN/RURAL RESIDENCE AND OCCUPATION CHOSEN

Residence	N	Per Cent of Each Residential Area Planning to Enter:										Total
		Other High Status Occup'ns	Occup'l Therap'ts and Physio-therapists	Tea-chers	Nur-ses	Lab and X-ray Techn'n	Secre-taries	Other Medium Status Occup'ns	Prac-tical Nur-sing	Other Low Status Occup'ns	Unclas-sifiable and no Job Choice	
Cities over 200,000.....	630	25	3	20	19	5	10	8	1	7	4	100
Cities and Towns	659	14	2	21	24	6	13	6	0	12	2	100
between 4,000 to 200,000												
Towns less than 4,000 ...	542	11	2	28	21	4	13	6	2	11	3	100
Farms not in Towns	636	6	1	26	20	4	16	6	4	16	2	100
No Response	110	16	2	28	27	8	7	3	0	7	3	100
Per cent of total	2,577	14	2	24	21	5	13	6	2	11	3	100

$\chi^2 = 171.3$; d.f. = 21; $P < .001$

If we compare the proportion of urban and rural girls planning to enter nursing with that of those choosing teaching and other medium status occupations (Table 2:5), it will be seen that, generally speaking, roughly the same proportion of girls in each category plan to enter nursing. In this respect, nursing is very similar to the other middle status occupations. However, it is interesting to note a difference between teaching and nursing in that girls from very small towns and farms are somewhat more likely to choose teaching (27 per cent) as a career than they are to choose nursing (21 per cent).

C. HIGH SCHOOL GRADES AND OCCUPATIONAL CHOICE

High school grades were supplied by the principals of the high schools attended by the girls in our sample. Unfortunately, some principals did not include this information so that we cannot include about one-third of our sample in our analysis of the importance of this particular factor. However, the social class composition of the smaller sample is almost identical to that of the complete sample which suggests that the loss of the students for whom the information concerning high school grades was not supplied has not introduced bias into the data with which we will be dealing in this section.

Table 2:6 shows that a girl's high school grades are related to the status of the occupation that she chooses; the higher the grades, the higher the status of the occupation she is planning to enter. This is particularly noticeable at the extremes; about twice as many girls with grades of 70 per cent or above plan to enter high status occupations as those with lower grades, while between two and three times as many girls with grades of 70 per cent or less choose low status

TABLE 2:6
RELATIONSHIP BETWEEN HIGH SCHOOL GRADES
AND STATUS OF OCCUPATION CHOSEN

	Per Cent of Each Grade Average Class Choosing:					
High School Grade Average	N	High Status Occupations	Medium Status Occupations	Low Status Occupations	Unclassi- fiable and No Job Chosen	Total
90% – 99%	132	29	58	5	8	100
80% – 89%	330	20	69	7	4	100
70% – 79%	440	18	71	10	2	100
60% – 69%	319	11	72	15	3	100
50% – 59%	393	11	64	24	1	100
Less than 50%	111	10	73	16	1	100
No Response	852	17	70	12	2	100
Per cent of total	2,577	16	69	13	3	100
Mean High School Grade		75	70	64	78	

$\chi^2=108.1$: d.f. = 15: $P < .001$

TABLE 2:7
HIGH SCHOOL GRADES AND OCCUPATION CHOSEN

High School Grade Average	N	Per Cent of Each Grade Average Class Choosing:										
		Other High Status Occup'ns	Occup'ls Therap'ls and Physio- therapists	Tea- chers	Nur- ses	Lab and X-ray Techn'n	Secre- taries	Other Medium Status Occup'ns	Prac- tical Nur- sing	Other Low Status Occup'ns	Unclas- sifiable and No Job Choice	Total
90% — 99%	132	27	2	28	11	5	10	4	2	4	8	100
80% — 89%	330	18	2	31	18	7	8	6	0	6	4	100
70% — 79%	440	16	2	25	22	5	12	8	1	9	2	100
60% — 69%	319	9	2	19	28	1	17	7	2	13	3	100
50% — 59%	393	9	2	16	21	4	16	7	5	20	1	100
Less than 50%	111	9	1	24	22	4	15	8	4	13	1	100
No Response	852	15	2	25	22	6	13	5	1	11	2	100
Per cent of total	2,577	14	2	24	21	5	13	6	2	11	5	100
Mean High School Grade		75	71	73	68	74	67	69	61	51	78	100

$\chi^2 = 165.9$; d.f. = 35; $P < .001$

occupations as do girls with high grades of 70 per cent or above. While this result is to be expected, it is surprising to note that both the relatively low proportion (23 per cent) of girls with high grades of 80 per cent or above select high status occupations, and the fact that as many as 10 per cent of girls with grades below 60 per cent plan to enter occupations which require a university training.

The high proportion of girls with high academic ability planning to enter jobs which do not require university training and therefore, by implication, who probably do not plan to go to university, may be explained by the fact that we did not include teaching in our high status category.¹

Table 2:7 shows in greater detail the distribution of students with different high school grades among the various occupations which we have selected for special attention.

First, comparing nursing with teaching, we find that teaching attracts a substantially higher proportion of the very academically able group (80 per cent average and above) than does nursing, while the latter occupation tends to draw a higher proportion of girls with average grades than teaching does.

It appears that the academic standing of girls attracted by nursing is more similar to those planning to become secretaries than to those choosing teaching.

Turning to the four medical occupations, the academic standing of girls planning to become therapists and technicians is higher than those choosing nursing; while that for those choosing practical nursing is the lowest of the four.

D. GEOGRAPHIC REGION

Tables 2:8 and 2:9 show the proportions of girls in our sample within each of five geographic regions choosing different occupations. The differences between

¹ As shown in Table 2:7, if we add the girls in the two highest grade categories who plan to become teachers, presumably after having attended university, the proportion entering high status occupations is increased from 23 per cent to 52 per cent. However, if we do the same for the two lowest grade categories, the proportion choosing high status jobs is also increased from 10 per cent to 29 per cent, from which we would infer that an even greater proportion of the less academically able girls have somewhat unrealistic occupational aspirations. It is our opinion that both the relatively high proportion of girls with low grades below 50 per cent who plan to become teachers (24 per cent) and the low proportion of academically able girls who plan to enter high status occupations is due to the ambiguous position of the teaching profession in our status categories, which are based upon the educational standard of the entrance requirements. Specifically, we have found that the proportion of people teaching school who have no formal education beyond high school and the percentage who have a university degree varies considerably from province to province. In provinces with low educational standards for teachers therefore, it is likely that a higher proportion of less academically able girls will see this as a realistic aspiration which would account for the high proportion of girls in the lower grade categories planning to enter teaching. Further, it is probable that the 30 per cent of the girls with grades of 80 per cent and above who aspire to become teachers, plan to go to university and in that case, we should include these in the high status occupational category.

The relatively small proportion of girls with grades of 50 per cent or less who plan to enter low status occupations (16 per cent) is probably also due to the high rate of choice for teaching in this group which, since we include teachers in the middle status group, result in a higher proportion (73 per cent) in this category and the lower one in the low status occupations.

In addition to the different images of the teaching profession, it is probable that some girls have unrealistic occupational aspirations and this may to some extent account for some of the findings concerning the relationship between high school grades and occupational choice.

Quebec and the Atlantic Provinces on the one hand and the remaining provinces on the other are probably the result of differences in their respective economies: girls in the less wealthy provinces tending to have somewhat lower occupational aspirations than those in the more wealthy provinces as reflected by the differences in the proportions of girls choosing high status occupations.

TABLE 2:8
GEOGRAPHIC REGION AND STATUS OF OCCUPATION CHOSEN

Geographic Region	Per Cent in Each Geographical Region Choosing:					
	N	High Status Occupations	Medium Status Occupations	Low Status Occupations	Unclassifiable and No Job Chosen	Total
Quebec	641	13	80	6	2	100
Atlantic Provinces ...	240	7	80	13	0	100
Prairies	458	18	70	10	2	100
Ontario	918	22	61	17	1	100
British Columbia	203	20	58	18	4	100
No response	117	11	62	25	2	100
Per cent of total	2,577	16	69	13	2	100

$\chi^2 = 123.9; \text{d.f.} = 12; P < .001$

The higher proportion of girls choosing low status jobs in Ontario and British Columbia is somewhat more difficult to explain except in terms of the greater availability of jobs of this type due to a more varied economy.

In general, the proportion of girls choosing nursing is about the same for all regions except British Columbia where the figure is lower.

E. RELIGION AND OCCUPATIONAL CHOICE

Information was obtained from our respondents concerning both religious affiliation and frequency of attendance at religious activities. Almost all Roman Catholics reported regular participation in religious activities, but it was possible to classify Protestants as either regular, or infrequent in their religious attendance. Table 2:10 shows the distribution of occupational choice among these three religious groups from which certain patterns emerge.

The first thing that one notices is that Protestants choose high status occupations twice as frequently as do Roman Catholics, who tend to be somewhat more likely to select middle status occupations than Protestants. Secondly, a higher proportion of nominal Protestants plan to enter low status occupations than do either active Catholics or Protestants.

If we look at specific occupations (Table 2:11), we find that regular attenders seem to favour service-oriented occupations such as social work, nursing, teaching and missionary work, while infrequent attenders appear to avoid them. We shall discuss this finding in more detail later on.

TABLE 2:9
GEOGRAPHIC REGION AND OCCUPATIONAL CHOICE

Geographic Region	N	Per Cent in Each Geographic Region Choosing										Total
		Other High Status Occup'ns	Occup'l Therapists and Physio-therapists	Tea-chers	Nur-ses	Lab and X-ray Techn'n	Secre-taries	Other Medium Status Occup'ns	Prac-tical Nur-sing	Other Low Status Occup'ns	Unclas-sifiable and No Job Choice	
Quebec.....	641	11	1	33	21	7	13	7	0	6	3	100
Atlantic Provinces.....	240	5	1	35	23	6	13	3	1	12	1	100
Prairies	458	15	2	27	23	3	12	5	0	9	3	100
Ontario.....	918	19	2	15	23	5	11	7	4	13	2	100
British Columbia.....	203	16	4	15	15	2	15	10	1	17	4	100
No response.....	117	10	1	20	16	3	21	3	2	23	3	100
Per cent of total	2,577	14	2	24	21	5	13	6	2	11	3	100

$\chi^2 = 206.8$; d.f. = 32; $P < .001$

TABLE 2:10

RELIGION AND STATUS OF OCCUPATION CHOSEN

Religious Affiliation and Attendance	N	Per Cent of Each Religious Category Choosing:				Total
		High Status Occupations	Medium Status Occupations	Low Status Occupations	Unclassifiable and No Job Chosen	
Roman Catholic } Regular	847	10	80	8	1	100
Protestant } Attenders	959	20	67	11	1	100
Protestant – Infrequent Attenders.....	517	17	60	21	3	100
Others and no response ...	254	25	54	19	2	100
Per cent of total.....	2,577	16	69	13	2	100

$\chi^2 = 93.1$; d.f. = 6; $P < .001$

TABLE 2:11

RELIGION AND OCCUPATIONAL CHOICE

GIRLS CHOOSING NON-SOCIAL SERVICE OCCUPATIONS

Occupation	N	Per Cent of Each Occupation:				Total
		Roman Catholic Regular Attenders	Protestant Regular Attenders	Protestant Infrequent Attenders	No Response	
Dietitian	27	19	56	19	7	100
Actress, Musician, Artist	44	27	30	23	21	100
Writer or Journalist	41	15	39	27	20	100
Stenographer or Private Secretary	330	34	32	25	9	100
Airline Stewardess	100	29	30	27	14	100
Sales Clerk.....	25	8	16	56	20	100
Typist or Office Clerk	150	23	35	31	11	100
Beauty Specialist	40	25	28	40	8	100
Other	287	22	39	24	15	100
Per cent of total	2,577	26	35	27	13	100

GIRLS CHOOSING SOCIAL SERVICE OCCUPATIONS

	N	Per Cent of Each Occupation:				
Social Work	97	30	46	9	14	100
Missionary	22	36	55	5	5	100
Physiotherapist and Occupational Therapist.....	47	19	47	23	11	100
Teaching	612	44	36	13	8	100
Nursing	551	34	44	17	5	100
Laboratory or X-ray Technician	122	43	30	15	13	100
Practical Nurse	42	12	41	29	19	100
Per cent of total	2,577	38	39	15	8	100
No response		31	26	33	10	100

$\chi^2 = 85.8$; d.f. = 3; $P < .001$

F. NATIONAL ORIGIN OF PARENTS AND OCCUPATIONAL CHOICE

The interesting differences in girls' occupational choices based on the national origin of the father that are revealed in Table 2:12 are:

1. that girls whose fathers come from abroad (except the United States) are somewhat more likely to choose high status occupations than daughters of Canadian-born fathers;
2. that daughters of Canadian and United States fathers are more likely to choose medium status jobs and less likely to choose both high and low status jobs than girls whose fathers are foreign-born (other than in U.S.);
3. that both nursing and teaching are chosen by fewer girls whose fathers come from Great Britain; and
4. that only a very small number of the daughters of immigrants from non-European countries choose teaching as a career.

In general, the occupations chosen by daughters of Canadian and United States fathers are very similar; on the other hand, the daughters of immigrants from countries other than the United States tend to have a somewhat different pattern of occupational choice. While the first group concentrates mainly on medium status occupations, the latter tends to have about twice as many seeking high status jobs as those in the first group, only about two-thirds as many choosing medium status occupations and a somewhat higher percentage taking low status jobs.

Within the latter group however, the daughters of British fathers choose both nursing and teaching less frequently than girls whose fathers came to Canada from other countries.

G. SUMMARY OF THE CHAPTER

In this section, we have shown that if we group occupations into those of high, medium and low status, based upon the standard of the educational entrance requirements, the kinds of girls who plan to enter occupations in each of these three groups vary with respect to the social class, urban-rural residence, academic ability, geographic region and religion. In general, girls planning to enter each of the high, medium and low status occupations respectively are proportionately more likely to come from the following groups:

Social Background Characteristics	High Status Occupations	Medium Status Occupations	Low Status Occupations
1. Social Class	Daughters of professional men	Daughters of white collar workers	Daughters of blue collar and farm workers
2. Urban-Rural Residence	Live in large cities	Live in medium and small size towns	Live in small towns and farms
3. High School Grades	High academic ability	Average high school grades	Low high school grades
4. Geographic Region	Ontario and British Columbia	Atlantic Provinces and Quebec	Ontario and British Columbia
5. Religion	Protestants	Roman Catholics	Nominal rather than active Protestants
6. National Origin of Parents	Daughters of immigrants (except from United States)	Daughters of Canadian and United States-born fathers	Daughters of immigrants (except United States)

It should be pointed out that each of the three classes of occupations is also chosen by other types of girls; however, girls with the above characteristics are *proportionately more frequently represented* among those who choose each of the classes of occupations respectively.

Nursing is a medium status occupation and is chosen by roughly equal proportions of girls: 1) from all social classes, 2) living in various size towns, except for the big cities which have a lower proportion; 3) from the entire range of high school grades, except the top, from which a lower proportion choose nursing (the average high school grade for those choosing nursing is 68 per cent); 4) from all regions of Canada, except British Columbia, where a somewhat lower proportion choose nursing; 5) who are Protestant and Roman Catholic; however, those who are religiously active are rather more likely to choose nursing than those who are not; 6) with fathers of all national origins, except those from Great Britain, who choose nursing less frequently.

In short, nursing seems to appeal equally to girls from all types of social backgrounds, except those living in large cities, having high scholastic ability, and those who are not active members of a religious group, and those whose fathers come from Great Britain. Girls with these characteristics tend to be attracted to nursing less frequently than are those from other groups.

We have pointed out that the social background characteristics of girls planning to enter medium status occupations are different from those choosing high or low status jobs, and that therefore nursing, being a medium status occupation, attracts girls with different social background characteristics from those choosing jobs with different kinds of status. However, it is also true that there are differences between the characteristics of girls choosing different occupations within

TABLE 2:12
FATHERS' BIRTH PLACE AND OCCUPATIONAL CHOICE

Fathers' Birth Place	N	Per Cent of Each Nationality Group Whose Daughters Choose:										
		Other High Status Occup'ns	Occup'1 Therapists and Physio-therapists	Tea-chers	Nur-ses	Lab and X-ray Techn'n	Secre-taries	Other Medium Status Occup'ns	Prac-tical Nur-sing	Other Low Status Occup'ns	Unclas-sifiable and No Job Choice	Total
Canada	2,088	13	2	25	22	5	13	6	2	10	2	100
Great Britain	170	25	4	15	14	2	12	6	1	18	4	100
United States	68	10	0	21	24	3	15	7	7	7	6	100
Other European Countries .	160	20	2	23	20	3	6	3	3	18	3	100
Non-European Countries....	22	27	0	5	32	0	9	9	0	18	0	100
No Response.....	69	16	3	28	15	4	13	7	0	12	3	100
Per cent of total	2,577	14	2	24	21	5	13	6	2	11	3	100

$\chi^2 = 82.0$; d.f. = 32; $P < .001$

the same status class, and throughout this chapter we have compared girls planning to become nurses first, with those choosing the medium status occupations of teaching and secretarial work and secondly, with those choosing other occupations in the medical field in each of the three status groups.

Specifically, we find the following differences:

<i>In Comparison with Girls Choosing Nursing,</i>	
Those Planning to Become Teachers Are, on the Average:	Those Planning to Become Secretaries Are, on the Average:
1. from a lower social class	1. from a lower social class
2. from more rural areas	2. from more rural areas
3. of a higher academic ability	3. of about the same academic ability
4. somewhat more likely to be Roman Catholic	4. less active in religious affairs

Finally, since occupational and physiotherapy are high status occupations, and practical nursing is a low status occupation, the social background characteristics of girls choosing these occupations are, generally speaking, more similar to those of girls choosing similar status occupations than they are to those choosing the medium status occupation of nursing. On the other hand, girls planning to become laboratory and X-ray technicians are very similar to those choosing nursing. At this point, we should emphasize that the social background characteristics of girls planning to enter nursing are not significantly different from all other girls not choosing this occupation; in other words, we cannot identify girls who choose nursing as being different from all other girls with respect to social background characteristics. Instead, the effect of the kinds of social background characteristics which we included in our analysis on the choice of an occupation, is such that it has consequences for the *status* of the occupation chosen rather than for the *particular* occupation chosen.

However, although we have shown that girls choosing occupations of different statuses are different in various ways with regard to each of the six social background characteristics, before we could draw conclusions from these data concerning the effects of these characteristics in determining the kind of occupation a girl will choose, it is necessary to look at the way in which these variables are interrelated in order to see whether each acts independently or not. Since this requires a rather detailed analysis which may not be of interest to many readers, we have included the appropriate data in *Appendix C* and we will merely summarize our conclusions concerning the relationships between these social background characteristics and the importance of each for the status of the occupation chosen.

The findings presented earlier in this chapter with respect to the first three social background characteristics can be summarized as follows: in general, we find that 1) the higher the social class of a girl's parents, 2) the larger the size of the town or city in which a girl resides and 3) the higher her academic performance, the higher the status of the occupation chosen. Further, social class and

urban-rural residence are strongly related to each other, while each is only moderately related to academic performance. On the other hand, it is not possible to state as simply the relationships between the remaining three factors of religion, geographic region and national origin of father because these are not conceptualized as continua, but can only be divided into classes. With respect to national origin of father, we would point out that some 84 per cent of our sample were girls of Canadian-born fathers, only 16 per cent had foreign-born fathers. Since we are primarily interested in the choice of nursing as a career, it must also be remembered that the principal effect of this factor on the choice of this occupation was that girls with British-born fathers tended to choose nursing less frequently than others. However, less than 7 per cent of our sample were girls in this category and therefore, since the effect of this particular factor is not particularly strong and since it also affects such a small proportion of girls, its total effect on the number of girls entering nursing is extremely small.

Turning now to the characteristics of religion and geographic region, we are of the opinion that a significant part of the relationship between these two characteristics and the status of the occupation chosen is accounted for by the first three factors of social class, urban-rural residence and high school grades. We have therefore excluded the former two from our further analysis of the relationship between social background characteristics and the status of the job chosen. However, since we did find a relationship between the extent of participation in religious activities and whether the job chosen was social service oriented or not, we will reintroduce this factor again later on.

To summarize then, the three social background characteristics which are related to occupational choice are: 1) social class of parents; 2) urban-rural residence and 3) high school grades. Social class is an important determinant of the status of the occupation chosen; the higher the social class of a girl's parents, the higher the status of the occupation chosen. Specifically, upper class girls choose high status jobs considerably more frequently than lower class girls, and lower class girls choose lower status jobs much more often than upper class girls. However, some upper class girls do plan to enter lower status jobs and some lower class girls choose high status occupations and the two factors which are important in determining these are:

1. high school grades;
2. urban-rural residence in the case of lower class girls.

If we combine these three factors into a "class-residence-grade" index, we find that the pattern of occupational choice in terms of the status of the occupation chosen is distinctly different for each of the six categories formed with this index (see Table 2:13).

There is a consistent and substantial reduction in the proportion of girls planning to enter high status jobs as we proceed from the top "C-R-G" category to the bottom: almost one half of the upper class girls with high academic ability choose high status occupations as against only 7 per cent for girls from rural areas with lower high school grades. The reverse is true for low status jobs; over one-quarter of the latter group plan to enter jobs of this kind as compared to only 5 per

TABLE 2:13

SOCIAL BACKGROUND CHARACTERISTICS AND OCCUPATIONAL CHOICE

"C-R-G" Class	N	High Status	Medium Status	Low Status	Unclassifiable and No Job Choice	Total
1. Professional and High Grades	61	48	40	5	8	100
2. Professional and Low Grades	55	33	61	4	2	100
3. White Collar and High Grades	378	23	56	7	5	100
Urban Blue Collar and High Grades						
4. White Collar and Low Grades	326	15	69	14	2	100
Urban Blue Collar and Medium Grades						
5. Rural Blue Collar and Farm and High Grades	314	12	76	10	2	100
6. Rural Blue Collar and Farm and Low Grades	430	7	67	26	1	100
No Response	1,013	16	72	12	2	100
Per cent of total	2,557	16	69	13	3	100

cent for upper class girls with high scholastic achievement. The largest proportions of girls choosing medium status occupations come from the middle classes.¹

Table 2:14 shows that nursing attracts much smaller proportions of girls with high grades (70 per cent or above) from the professional and white collar groups and from the urban blue collar category than from other classes. The group which supplies a relatively high proportion of girls to nursing is that of upper class girls with low grades. In contrast, teaching tends to attract a higher proportion of girls with high scholastic ability from all of the social classes. Generally speaking, the characteristics of girls attracted towards nursing are more like those choosing secretarial work than those choosing teaching.

Slightly under one-half of those choosing nursing come from lower class families in rural areas and, among the girls in rural areas, about the same number of those with high academic ability choose this occupation as those with low academic performance. About the same number of those choosing nursing come from families of white collar workers and urban lower class families, although a high proportion of the girls with low grades choose nursing in this group. Less than 10 per cent of the girls choosing nursing come from the professional class and, among these girls, their academic ability makes a great deal of difference in their choice of nursing; a much higher proportion of those with low grades choose nursing in the top social class.

¹ See Appendix C for a more detailed discussion of the relationship between the "C-R-G" index and occupational choice.

TABLE 2:14
SOCIAL BACKGROUND CHARACTERISTICS AND OCCUPATIONAL CHOICE

“C-R-G” Class	N	Per Cent of Each “C-R-G” Class Choosing:										
		Other High Status Occup'ns	Occup'1 Therapists and Physio-therapists	Tea-chers	Nur-ses	Lab and X-ray Techn'n	Secre-taries	Other Medium Status Occup'ns	Prac-tical Nur-sing	Other Low Status Occup'ns	Unclas-sifiable and No Job Choice	Total
1. Professional and High Grades.....	61	43	5	20	12	2	3	3	3	2	8	100
2. Professional and Low Grades.....	55	22	11	9	38	0	7	7	0	4	2	100
3. White Collar and High Grades.....	378	20	3	25	18	6	10	7	0	7	5	100
. Urban Blue Collar and High Grades.....												
4. White Collar and Low Grades.....	326	14	1	22	24	3	13	7	1	13	2	100
. Urban Blue Collar and Farm and High Grades.....												
5. Rural Blue Collar and Farm and High Grades.....	314	11	1	32	19	7	12	6	2	8	2	100
6. Rural Blue Collar and Farm and Low Grades.....	430	6	1	18	20	3	19	7	5	21	1	100
No response	1,013	14	2	25	23	6	13	5	1	11	2	100
Per cent of total	2,577	14	2	24	21	5	13	6	2	11	3	100

$\chi^2 = 252.3$; d.f. = 40; $P < .001$

VALUES, JOB PERCEPTIONS, SELF-IMAGE AND OCCUPATIONAL CHOICE

The first group of mediating variables, that we hypothesized were important in explaining the relationship between our social background characteristics and occupational choice, were: 1) values, 2) job perceptions and 3) self-image. The present chapter will discuss the relationship of each of these to occupational choice in general and then to nursing in particular.

A. VALUES AND OCCUPATIONAL CHOICE

As explained in Chapter I, there were three kinds of values which we believed were associated with occupational choice and these may be seen as proceeding from the general to the more specific:

- 1) society-benefiting, family-benefiting, and self-benefiting values,
- 2) specific occupational values which we divided into: a) extrinsic or “goal-oriented” values and b) intrinsic or “instrumental” values,
- 3) particular characteristics of alternative occupations.

At the time we began this research, we endeavoured to conceptualize the kinds of values, goals or objectives which girls would be most likely to see as being mediated in varying degrees by one's occupation and which they might therefore use in evaluating various occupational alternatives which they saw as available to them. It seemed to us that different people have different objectives in life; that they place a different emphasis on various kinds of possible attainments they seek; that they differentially evaluate goals of various kinds that one might seek in life. Insofar as the kind of value hierarchy that one has usually implies something about the kind of person he or she is, both to others and to oneself, and since in large part our image of ourself is influenced by the kind of job we have, it seemed to us that the choice of an occupation would be affected by the kind of person we want to be, which is closely related to the kinds of goals we select for ourselves as worth striving for.

We would like to emphasize here that we do not believe that people actually go through this kind of analysis; that they sit down and consciously ask themselves the question “Now, what goals in life do I want to aim for?” and, having developed a consistent and coherent hierarchy of values, then look at the various occupations

that are available to them and systematically evaluate each one in terms of the objectives they have chosen for themselves, and finally make a rational choice. We do not suggest that this process is typical of people's behaviour with respect to occupational choice or of much, if any, other human behaviour. Furthermore, although our formulation may imply such a process, it is not *necessary* to assume it in order to accept our approach. The kinds of values we hold may influence our choice of behaviour without our realizing it at the time. For instance, we tend to develop sets or predispositions to act in certain ways in particular situations which at one time may have been consciously thought out or they may even have been accepted because others with whom one identifies act in that way, or say they do. From then on our behaviour often becomes habitual. Thus a highly religious person, for example, may never consider becoming a bookmaker, not because he consciously analyzes this occupation in terms of his religious values (although, if he were asked, he might analyze the problem and decide that he values it negatively), but because it is not included in the list of available occupations that his parents, friends and other associates speak about in terms of valued occupations, and since he sees himself as being similar with respect to values as these others, he tends to use the same kind of frame of reference that they do.

One could think of a whole host of objectives that people frequently offer as reasons for wanting or liking a particular job or not liking others. "I would like to be so and so because I could feel I would be helping people in trouble"; "I would like to go into so and so because it is an important job in our society"; or "I would not like to be a because there is too much risk involved", are evaluations of occupations which imply certain values or objectives. Rather than using a long ad hoc list of such values, we tried to group them into a set of general classes. Insofar as one's occupation constitutes an important part of one's life and, therefore, importantly influences the kind of image one has of oneself as a person, citizen, and a member of society, we came to the conclusion that the kinds of positions in society that one sees as legitimate or proper for one to aspire to, and this may be called one's general "life values", would affect the kind of occupation that would be chosen. For this particular class of values, we saw three types that could potentially be ranked by girls, namely: 1) society-benefiting, 2) family-benefiting and 3) self-benefiting. In other words, girls who feel it is more important for them to enjoy themselves by generally having fun than to feel it is a duty to prepare for marriage and raising a family, or more important than it is to contribute to the betterment of society in general, are likely to choose different occupations from girls who place these three values in the opposite order.

The values we selected for the second class are more closely associated with the job itself and the majority of these concern such things as: a desire to have a job, 1) which permits one to be creative, 2) for which one has special abilities, 3) in which the surroundings are pleasant, 4) which provides security, 5) which provides many opportunities for inter-personal relations and 6) which is consistent with or facilitates or assists marriage and family plans. The common feature of the first two is that they are "intrinsic" values or those which stress the importance of the job itself, while the last four are "extrinsic" values which

place less emphasis on the job itself as a criterion for choice and more on the job as a means of achieving something else.

The third class of values is more properly called “characteristics of the occupation” and this refers to the particular characteristics of the occupation which may be differently valued and thus result in attracting some and repelling others. Because of the enormous number of such characteristics, we limited our investigation to those that were particularly relevant to the occupation of nursing.

We will now discuss the relationship between each of these classes of values and occupational choice.

1. Society-benefiting, Family-benefiting, Self-benefiting Values and Occupational Choice

We attempted to see to what extent a girl’s choice of an occupation was a function of the relative importance she attaches to society, her future family or her own pleasure and enjoyment. Our measure of this class of values was obtained by asking our respondents to choose between these three kinds of values when they were presented to her in pairs. Thus when these choices from the paired comparisons were put together, it enabled us to classify girls according to the hierarchy in which they ranked self, family or society-benefiting values,¹ and Table 3:1 shows the distribution among the six possible value configurations.

TABLE 3:1
DISTRIBUTION OF SAMPLE AMONG SOCIETY–FAMILY–SELF
VALUE CONFIGURATIONS, Rank Order of Values:

Pattern Number	1	2	3	N	Per Cent
1	Self	Family	Society	314	12
2	Self	Society	Family	234	9
3	Family	Self	Society	303	12
4	Family	Society	Self	432	17
5	Society	Self	Family	416	16
6	Society	Family	Self	700	27
No response				178	7
Total				2,577	100

Table 3:2 shows the proportion of our respondents in each occupational choice category who fell into each of the six possible rank orderings of the three values:

¹ It was possible for girls to answer these paired comparisons in such a way that no clear hierarchy could be established. However, only 6.9 per cent of our respondents either failed to answer enough items to make a ranking possible, or answered in such a way that no hierarchy of values resulted, and all of the six possible rank orders of the three values was given by a sufficient number of respondents as to suggest that each is a realistic alternative hierarchy.

TABLE 3:2
DISTRIBUTION OF SOCIETY-FAMILY-SELF VALUE CONFIGURATIONS
FOR DIFFERENT OCCUPATIONS CHOSEN

Occupation Chosen	N	Per Cent of Each Occupational Class with Configurations of Values:							
		1	2	3	4	5	6	No Response	Total
Physiotherapist	35	3	14	14	6	23	34	6	100
Occupational Therapist	12	17	8	8	8	17	42	0	100
Dietitian	27	7	4	22	26	7	22	11	100
Social Worker	97	3	8	0	10	31	45	2	100
Actress, Musician, Artist.....	44	27	16	16	18	7	5	11	100
Writer, Journalist.....	41	17	24	2	5	27	15	10	100
Missionary	22	0	5	5	5	23	55	9	100
School Teacher	612	10	8	10	20	13	32	7	100
Steno/Private Secretary	330	25	9	23	19	9	10	6	100
Registered Nurse.....	551	3	5	6	18	20	42	7	100
Lab/X-ray Technician	122	12	7	13	19	16	25	7	100
Airline Stewardess	100	24	24	13	9	15	9	6	100
Sales Clerk.....	25	8	24	20	12	4	20	12	100
Typist/Office Clerk	150	13	7	23	21	16	15	6	100
Practical Nurse	42	2	7	2	17	21	43	7	100
Factory Worker.....	1	100	0	0	0	0	0	0	100
Beauty Specialist	40	23	10	28	15	10	10	5	100
Other	287	17	13	12	11	20	18	9	100
No response	39	23	10	3	15	15	26	8	100
Per cent of total	2,577	12	9	12	17	16	27	7	100

$\chi^2 = 509.7$; d.f. = 90; $P < .001$

For the purpose of our analysis, we have combined the first, second and third pairs of patterns so that each of the resulting three categories includes girls who rank each of the three values, society, family, self over the other two, as shown in Table 3:3.

From the bottom part of the table, it can be seen that there are some differences in the value patterns held by girls choosing high, medium and low status occupations. For all girls taken as a group, almost one-half rank society-benefiting values above the other two, while the number for whom family-benefiting values are most important is somewhat greater than that for those preferring self-benefiting values. However, society-benefiting values appear to be of greatest importance to girls choosing high status occupations, next for those choosing medium status and least for those planning to take low status jobs. The relative importance of family-benefiting values for the three groups is in the opposite order, namely, highest for those choosing low status jobs, next comes medium status and last those choosing high status occupations. With respect to the importance of self-benefiting values, about the same proportion of each of the three groups ranks these above the other two.

TABLE 3:3
DISTRIBUTION OF SOCIETY-FAMILY-SELF VALUE CONFIGURATIONS
FOR DIFFERENT OCCUPATIONS CHOSEN

Occupation Chosen	N	Per Cent of Each Occupational Class With Configurations of Values:				
		Society>Family Self	Family>Society Self	Self>Family Society	No Response	Total
Physiotherapist.....	35	57	20	17	6	100
Occupational Therapist...	12	59	16	25	0	100
Dietitian.....	27	29	48	11	11	100
Social Worker.....	97	76	10	11	2	100
Actress, Musician, Artist .	44	12	34	43	11	100
Writer, Journalist	41	42	7	41	10	100
Missionary	22	78	10	5	9	100
School Teacher.....	612	45	30	18	7	100
Steno/Private Secretary...	330	19	42	34	6	100
Registered Nurse	551	62	24	8	7	100
Lab/X-ray Technician....	122	41	32	19	7	100
Airline Stewardess	100	24	22	48	6	100
Sales Clerk	25	24	32	32	12	100
Typist/Office Clerk	150	31	44	20	6	100
Practical Nurse.....	42	64	19	9	7	100
Factory Worker	1	1	0	0	0	100
Beauty Specialist.....	40	20	43	33	5	100
Other.....	288	38	23	30	9	100
No response.....	39	41	18	33	8	100
Per cent of total	2,577	43	29	21	7	100
High Status Occupations ..	278	53	19	22	7	100
Medium Status Occupations	1,715	44	30	19	7	100
Low Status Occupations ..	257	34	38	22	7	100
Others.....	288	38	23	30	9	100
No response.....	39	41	18	33	8	100
Per cent of total	2,577	43	29	21	7	100

However, while we do find these differences between girls choosing occupations of different statuses, it must also be noted from the top of Table 3:3 that girls choosing different occupations within a particular status category possess very different value patterns; for example, in the high status category, those planning to become actresses, musicians or artists are distinctly different from those planning to become social workers; within the medium status group, registered nurses are quite different with respect to their value pattern from airline stewardesses and within the low status occupations, those choosing practical nursing are significantly different from those intending to become beauty specialists. If we rank order the occupations in terms of the proportion of girls within each who rate the importance of society-benefiting values higher than the other two, we find that the first nine occupations are:

TABLE 3:4

Occupation Chosen	Per Cent Ranking "Society" Above Family and Self
Missionary	78
Social Worker	76
Practical Nurse	64
Registered Nurse	62
Occupational Therapist.....	59
Physiotherapist	57
Teacher	45
Writer, Journalist	42
Laboratory and X-ray Technician	41

It is particularly interesting to note, that apart from writer and journalist, all of the above occupations are "social service oriented" ones and, further, that no occupation of this kind that we listed is excluded from the list. It will also be seen that all of the five medical occupations are included in the list and that, generally speaking, the rank order of the eight social service oriented occupations roughly corresponds to the general image of these occupations in terms of the degree to which they are social service oriented; in other words, the degree to which people in these occupations directly provide aid to those in need.

Not only are these social service oriented occupations the ones which attract girls for whom society-benefiting values are most important, but these girls also rate self-benefiting values lower than girls entering other occupations with only one exception (viz., dietitians). In fact, as can be seen from Table 3:2, every one of the eight social service oriented occupations has the value configuration of society greater than family, greater than self, while for no other occupation is this the case, which clearly indicates that girls choosing this type of occupation have different value preferences and seek different objectives through their occupational choice than other girls.

We could of course undertake the same kind of analysis with respect to family-benefiting and self-benefiting values, but our focus is primarily on girls choosing nursing as a career and since we have already shown that these girls are like girls choosing other social service oriented occupations and unlike girls who choose other kinds of jobs with respect to these value patterns, we will not go into any more detailed analysis of the relationship between these values and the choice of other kinds of jobs, except to say that the hierarchy of these three values that a girl has seems to us to be related to the kind of job a girl chooses within each status category rather than to the status of the job chosen.

We suggest that these findings support conclusions that the relative emphasis which girls place upon society-benefiting, family-benefiting and self-benefiting values is closely associated with the kinds of occupations they choose. Specifically, it seems clear that:

- 1) Those girls who regard society-benefiting values most highly of the three tend to choose social service oriented occupations such as social work, the medical occupations, and teaching, in that order, all of which are occupations which in varying degrees are directly involved in providing help to those who need it.

2) The girls who choose social service occupations also rate self-benefiting values lowest of all other occupational groups.

3) The modal value pattern for girls choosing social service occupations, including nursing, is society> family> self.

4) Occupations other than social service oriented ones tend to attract girls who regard family-benefiting and self-benefiting values as more important than society-benefiting values.

5) Girls choosing occupations (other than social service ones) in the high and medium status categories appear to rate self-benefiting values somewhat higher than family-benefiting values while the reverse is true for girls choosing occupations in the low status group.

B. OCCUPATIONAL VALUES AND OCCUPATIONAL CHOICE

Information was also obtained from our respondents with respect to a large number of “valued characteristics” of occupations which we grouped under six general headings. From our analysis of these data, we concluded that the best way of grouping the items we used to distinguish between different occupational choices was as follows: (see Appendix D for precise items used for each dimension.)

- 1) “Creativity”
- 2) “Security”
- 3) “Self-Development”
- 4) “Self-Pleasure”

The value of “creativity” refers to the desire to have the kind of job which permits a girl to be creative and original; “self-development” on the other hand, refers to the goal of utilizing one’s capacities or abilities to the fullest extent, involving a desire for achievement and self-development; “security” is defined as wanting a job that pays well and enables a person to look forward to a stable and secure future; finally, by “self-pleasure” values we broadly mean those objectives which are sought primarily in order to provide enjoyment and pleasure to the individual, such as opportunities for travel, to work with people who provide enjoyable companionship and working in pleasant surroundings.

Referring to the bottom part of Table 3:5, it is clear that girls choosing occupations of different statuses differ in the relative importance they attach to these four occupational values. Girls planning to enter high status occupations value opportunities for “creativity” more than those choosing medium and low status jobs; the latter place a greater importance on “security” than the former; in fact, it will be seen from the inspection of each occupation separately in the upper half of the table that, while the proportion of girls valuing “creativity” in the high status occupations ranges from 46 per cent to 83 per cent, none is ever lower than the highest proportion for the medium and low status occupations (17 per cent to

45 per cent). The situation is similar with respect to the proportions valuing "security"; the high status occupations always have a lower proportion valuing "security" (17 per cent to 55 per cent) than is the case for the medium and low status occupations (55 per cent to 81 per cent).

TABLE 3:5
OCCUPATIONAL VALUES AND OCCUPATIONAL CHOICE

Occupation Chosen	N	Per Cent of Each Occupational Class Valuing:			
		Creativity	Security	Self-Development	Self-Pleasure
Physiotherapist	35	46	51	54	46
Occupational Therapist	12	58	42	92	8
Dietitian	27	67	33	66	30
Social Worker	97	55	45	60	40
Actress, Musician, Artist	44	73	27	82	18
Writer, Journalist	41	83	17	68	32
Missionary	22	46	55	59	41
School Teacher	612	29	70	65	35
Steno/Private Secretary	330	19	81	42	58
Registered Nurse	551	20	79	63	36
Lab/X-ray Technician	122	30	68	65	34
Airline Stewardess	100	29	71	47	53
Sales Clerk	25	32	68	28	68
Typist/Office Clerk	150	19	81	29	69
Practical Nurse	42	17	81	41	60
Beauty Specialist	40	45	55	38	63
Other	288	47	52	66	32
No response	39	31	67	62	36
Per cent of total	2,576	31	69	58	41
High Status Occupation	278	61	39	66	34
Medium Status Occupation ...	1,715	24	75	59	41
Low Status Occupation	258	24	76	32	67

Turning to the importance of "self-development" and "self-pleasure", we find that the higher the status of the occupation chosen, the greater the proportion of girls valuing "self-development" and the lower the proportion of girls valuing "self-pleasure". And again, we find a fairly clear-cut distinction between girls choosing different status occupations; with regard to the value of "self-development", the proportions of girls in the high status occupations for whom this is important range from 54 per cent to 92 per cent, in the middle status occupations the proportions are from 42 per cent to 65 per cent and in the low status category the figures are from 28 per cent to 41 per cent. The proportions of the high and medium status occupations who value "self-pleasure" highly (8 per cent to 58 per cent) are always lower than the proportions of the low status occupations (60 per cent to 69 per cent).

In summary then, the values ranked most important for girls planning to enter occupations in the three status categories are:

- High Status: Creativity Self-Development
- Medium Status: Self-Development Security
- Low Status: Security Self-Pleasure

The above analysis has been based on a consideration of each of the four values separately; we will now apply a more severe test, namely, the proportions of each occupational status group who value the three pairs of values when taken together.

The modal value pattern has been enclosed in a box and it will be noticed that the proportion of each of the three occupational status groups holding this particular configuration of occupational values is far greater than the proportion holding either of the other two alternative patterns; in fact, just under one-half of each group chose the appropriate value configurations, the remainder being spread over the other two patterns. In general then, we suggest that these data support the view that the kinds of occupational values held by a girl affect the status of the job she chooses. We would also like to point out that the three value configurations may be seen as lying along a continuum of “intrinsicness to extrinsicness”; by having “intrinsic” values, we mean that a girl wants a job for its own sake, because the work is attractive to her; those with “extrinsic” values on the other hand, want a job not because they like the work, but more importantly because it is instrumental in enabling them to attain other objectives. In this sense, the values of “creativity” and “self-development” are intrinsic while those of “security” and “self-pleasure” are extrinsic. The three different value patterns shown to be differentially important for those choosing occupations of

TABLE 3: 6
INTRINSIC-EXTRINSIC VALUES HELD
AND STATUS OF OCCUPATION CHOSEN

Status of Occupation Chosen	N	Per Cent of Each Occupational Class Valuing:			
		Intrinsic ←————→ Extrinsic			No Response
		Creativity and Self-Development	Self-Development and Security	Security and Self-Pleasure	
High Status.....	433	41	25	16	1
Medium Status	1,770	15	43	31	1
Low Status	332	13	26	45	3
Unclassified and No Job Choice	42	24	38	26	2
Per cent of total	2,577	20	38	30	1

$\chi^2 = 245.87$; d.f. = 6: $P < .001$

different statuses can therefore be placed along this continuum from the most intrinsic (creativity and self-development) which are highly valued by those choosing high status occupations, to the most extrinsic (security and self-pleasure) which are chosen most frequently by those planning to enter the low status occupations; the value pattern falling between these two extremes is that of self-development and security which is the typical pattern for those choosing medium status jobs.

Thus we can say that the higher the status of the occupation, and therefore the greater the amount of training required to enter it, the greater the importance of intrinsic values to those who choose these occupations; further, the lower the status of the occupation and the lower the training requirements for entry, the more important will be extrinsic values for those who choose these occupations.

The clear relationship between the occupational value pattern and the status of the occupation chosen can also be seen to account for the differences between the value patterns of those entering the different medical occupations, and the differences between those choosing these occupations than those of teaching and secretarial work, as shown in Table 3:7.

TABLE 3:7
OCCUPATIONAL VALUE PATTERNS OF THOSE CHOOSING
SELECTED OCCUPATIONS

Status of Occupation Chosen	Occupation Chosen	N	Per Cent of Each Occupational Class Valuing:		
			Intrinsic	↔	Extrinsic
			Creativity and Self-Development	Self-Development and Security	Security and Self-Pleasure
High Status	Occupational and Physiotherapists	47	32	32	17
Medium Status	School Teacher	612	19	45	25
	Lab and X-ray Technician	122	23	42	26
	Registered Nurse	551	12	50	29
	Secretary	330	8	33	47
Low Status	Practical Nurse	42	10	31	50

The situation with respect to those choosing secretarial work is not particularly surprising since, as we have shown in Capter II, this occupation is more like the low status occupations than the medium status occupations in several respects.

Summary

With regard to the significance of the self-family-society values, we found that these do not appear to be related to the status of the occupation but rather

to determine a girl's choice of occupation within each status category. It is true that high and medium status occupations do tend to attract a somewhat higher proportion of girls for whom society-benefiting values are important than is the case for low status occupations, and the latter jobs are chosen by a higher proportion of girls valuing self-pleasure values than we find for high status occupations, but the differences in the proportions of girls rating each of these values highly *within* each of the status groups are considerable, which suggests that these values are related to the kind of occupation rather than to its status.

Those girls for whom society-benefiting values are very important tend to choose social service oriented occupations such as social work, medical occupations and teaching, and the greater the importance of this value, the more social service oriented will be the job chosen. These girls also rate "self-benefiting" values much less important than girls choosing other occupations.

On the other hand, the significance of the four occupational values is not their effect on the particular kind of job chosen, but rather on the *status* of the occupation a girl chooses. Generally speaking, the higher the status of the occupation a girl plans to enter, the more important the intrinsic values of "creativity" and "self-development", while the lower the status of the job chosen, the greater the importance of the extrinsic values of "security" and "self-pleasure".

Comparing the four medical occupations that we used in this study, we found that nurses, both registered and practical, tend to place greater importance on society values than occupational therapists and physiotherapists and laboratory and X-ray technicians and, of the last two, a higher proportion of therapists chose society-benefiting values than did technicians. The therapists and the technicians also tended to place greater emphasis on self-pleasure values than did the nurses.

A question may be raised concerning the assumption we have made that because there is a relationship between the values a girl holds and the occupation she chooses, the former determine the latter. Logically however, it is just as legitimate to claim that the girl's choice of an occupation results in the assumption of certain value positions since, having assumed an occupational image, she thinks these values are appropriate to that image. In other words, if she decides to become a nurse, for example, when asked to indicate her preference for various statements about jobs, she will reply in terms of the job she has chosen and, since a popular image of the nurse is that her work is important for society, she may well indicate that she wants to have a job which serves this function. From the data concerning the relationship between these values and disposition towards nursing, it is possible to get some idea of whether such "anticipatory socialization" takes place in the case of those planning to enter nursing and, if it does, to what extent it accounts for the fact that we found these girls holding a different configuration of values from girls choosing other occupations.

TABLE 3:8

DISPOSITION TOWARDS NURSING AND SOCIETY-FAMILY-SELF VALUES				
Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category Ranking:		
		Society > (Family > (Self	Society > Family > Self	Per Cent at Mid-point on Intrinsic-Extrinsic Values Scale
Favourable.....	220	68	51	56
	331	57	36	47
	278	47	33	40
	634	44	29	35
Unfavourable	1,081	32	18	33
No response.....	33	39	18	33
Per cent of total.....	2,577	43	27	38

Our five “disposition towards nursing” categories were made up of the following groups:

- ↑

↓

Favourable

1: girls whose first choice of an occupation was nursing and who said that this choice was “very definite”.

2: girls whose first choice is nursing but who did not think that this choice was “very definite”.

3: girls whose second or third choice of an occupation was nursing.

4: girls who did not give nursing as an actual choice but said that they would like to be nurses when asked this question specifically.

Unfavourable

5: girls who did not choose nursing as an occupation and said they would not like to become nurses when asked this question specifically.

We can ignore group 5, composed of girls who neither like nor plan to enter nursing, since we did not anticipate that a significant proportion of them would share the same kinds of values as those going into nursing. However, groups 1 to 4 can be seen as ranged at different distances from entering into the nursing profession and therefore at varying distances from the point at which a person would assume the image of a nurse. Those in group 1, who had made a definite decision to become nurses, are most likely to have an image of themselves as nurses, while group 4, who say that they like nursing but who are not considering it as an occupation are least likely of the four groups to have assumed the image of a nurse. Since we are claiming that the values a girl holds affect her attitudes toward nursing, we would expect that the more favourable her attitude, the higher the proportion of girls who hold the values appropriate to the group having decided

to enter the nursing profession, and therefore we anticipate that the figures in Table 3:8 will increase as we proceed from group 4 to group 1. However, if a substantially higher proportion of those who have chosen nursing (groups 1 and 2) hold these values as compared with those who have not (groups 3 and 4), then this would suggest that increasingly favourable attitudes cannot be held responsible for this, but rather that it is due to anticipatory socialization.

From an inspection of the table, it will be seen that the increase in the proportion holding the configuration of society> family> self values appropriate to nursing, increases from group 4 to group 3 to group 2 at the rate of about 3 per cent or 4 per cent; the increase from group 2 to group 1 however is 14 per cent. This also applies to the other two columns in Table 3:8. We conclude therefore that a certain amount of anticipatory socialization may have taken place, but it does not appear to account for the substantially higher proportion of girls going into nursing who hold these values as compared with the proportion of girls not choosing this occupation. Even if we reduce the figure in the first column for group 1 to take account of the effect of having chosen this occupation, the difference between group 1 and group 4 is still fairly large.

The fact that the relevant differences on the intrinsic-extrinsic scale are not as pronounced as those for the society-family-self values is to be expected, since we have already suggested that whereas the society-family-self values distinguish between the *kinds* of jobs girls will seek, the intrinsic-extrinsic values are associated with the *status of the job*. A comparison of the values of girls based upon the different attitudes towards nursing, as distinct from job status, would not therefore be expected to yield particularly impressive differences on the intrinsic-extrinsic scale.

C. PERCEPTIONS OF OCCUPATIONS AND OCCUPATIONAL CHOICE

It was our opinion that the choice of an occupation is to some extent a function of the relationship between the objectives a girl seeks on the one hand, and on the other, her perception of the occupational alternatives available to her (which provide an evaluation of the extent to which different occupations mediate these objectives), and her self-image in the sense that this provides an evaluation of herself with respect to her ability to fulfil the occupational role as she sees it.

In this section. we will deal with the relationship between values and job perceptions and their effects on occupational choice, while the problem of the effects of 'self-image on the selection of an occupation will be discussed in the next section.

1. Perceptions of Society-Family-Self Values

First, let us look at the degree of consensus that exists between the girls planning to enter each occupation with respect to the image of that occupation in terms of the extent to which it mediates the society-family-self values.

In all cases except one (writer and journalist) the values which each occupation is seen as mediating are those which are held by the largest number of

TABLE 3:9
CONSENSUS AMONG GIRLS IN EACH OCCUPATIONAL CLASS REGARDING
PERCEPTIONS OF SOCIETY-FAMILY-SELF VALUES MEDIATED
BY THAT OCCUPATION

Occupation Chosen	N	Modal Value Configuration	Per Cent of Each Occupational Class Valuing Modal Value Pattern	Per Cent of Each Occupational Class Perceiving Job as Mediating Values:		
				Same As Modal Value	Other Values	No Response
Missionary	22	Society>Family „Self	78	64	5	32
Social Worker ...	97		76	58	5	36
Practical Nurse .	42		64	53	19	29
Registered Nurse	551		62	62	20	18
Occupational and Physiotherapist	47	„	58	45	9	47
Teacher	612	„	45	46	24	30
Lab/X-ray Technician ...	122	„	41	34	31	36
Writer/Journalist	41	„	42	14	39	46
Typist/Office Clerk	150	Family>Society Self	44	36	41	23
Steno/Private Sec.	330		42	35	39	27
Beauty Specialist	40		43	38	39	25
Dietitian	27		48	41	27	33
Sales Clerk	25	Self>Family Society	32	20	36	44
Airline Stewardess ...	100		48	41	22	37
Actress, Musician, Artist	44		43	34	32	34
Other	2,250		51	46	26	28
No response	288					
	39					
Per cent of total.	2,577					

girls planning to enter each occupation and, generally speaking, the greater the similarity of society-family-self values held by those planning to enter a particular occupation, the greater is the consensus among them that that occupation facilitates these objectives. It should also be noted that girls seem to agree more on what objectives they seek than they do about what kind of job they have chosen, although it is significant that a fairly substantial proportion of girls do not respond to the question concerning their perceptions of the job they have chosen, which accounts in part for the lower degree of consensus on this item. There appears to be a greater degree of consensus among those choosing social service occupations with regard to the value image of these occupations than among girls choosing other jobs.

In Table 3:10 we have shown, for each occupation chosen, the extent to which persons having different society-family-self value patterns perceived these

TABLE 3:10
SOCIETY-FAMILY-SELF VALUES HELD AND
VALUES PERCEIVED IN OCCUPATION CHOSEN

Occupation Chosen	N	Modal Value Configuration	Per Cent Giving Modal Value Who Also Perceive Job	Per Cent Not Giving Modal Value Perceiving Job As Satisfying Their Values	Per Cent of Each Occupational Class Perceiving Job As Satisfying Their Values
Missionary	22	Society > Family Self	70	100	67
Social Worker.....	97	”	74	38	60
Practical Nurse.....	42	”	71	50	53
Registered Nurse	551	”	87	50	61
Occupational and Physiotherapist	47	”	88	25	46
Teacher	612	”	83	43	59
Laboratory and X-ray Technician	122	”	67	63	64
Writer/Journalist.....	41	”	80	82	59
Typist/Office Clerk	150	Family > Society Self	57	47	47
Steno/Private Secretary.....	330	”	74	55	55
Beauty Specialist.....	40	”	63	42	43
Dietitian.....	27	”	100	91	78
Sales Clerk.....	25	Family Self > Society	25	75	50
Airline Stewardess	100	”	59	59	52

in the job they have chosen. Generally speaking, those who hold the modal values for a particular occupation are more likely to see the job they have chosen as mediating these values, but it should be pointed out that although there is disagreement about the objectives sought by girls entering a particular occupation, most girls see the job they have chosen as facilitating the achievement of their particular values. In other words, there is a high degree of agreement between the values a girl seeks and the values she thinks will be satisfied by the job she has chosen, but girls planning to enter the same occupation will disagree among themselves concerning the kinds of values it mediates.

2. Perceptions of Intrinsic-Extrinsic Values

Since we decided earlier in this chapter that intrinsic-extrinsic values are related to the status of the job chosen rather than the kind of job, we have elected to compare those entering occupations of different statuses in terms of the values they perceive in the jobs they are planning to enter.

TABLE 3:11
STATUS OF OCCUPATION CHOSEN AND
INTRINSIC-EXTRINSIC VALUES PERCEIVED IN JOB

Status of Occupation Chosen	N	Per Cent of Each Occupational Class Perceiving Values in Job Chosen:			
		Intrinsic \longleftrightarrow Extrinsic			
		Creativity and Self- Development	Self- Development and Security	Security and Self- Pleasure	No Response
High Status.	433	27	19	8	35
Medium Status	1,770	12	39	23	22
Low Status	332	10	24	34	22
No response and unclassified ..	42	15	19	12	55
Per cent of total	2,577	15	33	22	25

$X^2 = 246.2$; d.f. = 6; $P < .001$

As in the case of the perceptions of occupations in term of the society-family-self values, a fairly high proportion of our respondents did not give their image of the occupation they had chosen in terms of its facilitating intrinsic-extrinsic values. However, in each of the three occupational status categories the modal pattern of values held by those choosing jobs of that kind is also perceived in those occupations. Again, the consensus with regard to job perceptions in this respect is lower than the amount of agreement among those planning to enter each type of occupation concerning the values they hold.

Table 3:12 also shows that a girl tends to perceive in the job she has chosen, those values she herself prefers.

TABLE 3:12
INTRINSIC-EXTRINSIC VALUES PERCEIVED IN JOB IN TERMS OF VALUES
PREFERRED AND STATUS OF OCCUPATION CHOSEN

Status of Occupation Chosen	Value Preferred	N	Per Cent Perceiving Values in Job Chosen:			
			Creativity and Self-Development	Self-Development and Security	Security and Self-Pleasure	No Response
High Status	Intrinsic 1	176	53	7	1	35
	↕ 2	109	15	51	7	27
	Extrinsic 3	68	10	16	26	46
Medium Status	Intrinsic 1	273	48	21	4	26
	↕ 2	764	6	67	10	16
	Extrinsic 3	553	2	18	51	26
Low Status.....	Intrinsic 1	43	42	19	7	23
	↕ 2	85	8	60	13	17
	Extrinsic 3	148	0	11	62	20
No response		78	14	21	10	55
Per cent of total		2,577	15	33	22	25

$\chi^2 = 1887.7$; d.f. = 33; $P > .001$

Because we were primarily interested in the nursing profession, we collected a great deal more information from our respondents about their perceptions of this occupation than we did about others. We asked all of the girls in our sample to indicate the extent to which they saw nursing as offering the benefits implied in the society-family-self values. In Table 3:13 we have divided our sample into the five “disposition towards nursing” categories and compared their images of the nursing profession in respect to these values.

TABLE 3:13
DISPOSITION TOWARDS NURSING AND PERCEPTIONS
OF NURSING IN TERMS OF
SOCIETY-FAMILY-SELF VALUES

Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category Perceiving Each Configuration of Society-Family-Self Values in Nursing:						
		Self > Family > Society	Self > Society > Family	Family > Self > Society	Family > Society > Self	Society > Self > Family	Society > Family > Self	No Response
Favourable.....	220	1	2	1	15	13	62	6
↕	331	1	1	1	15	12	62	8
↕	278	1	1	4	11	12	66	5
↕	634	1	2	1	10	12	69	5
Unfavourable	1,081	2	2	2	9	10	69	8
No response	33	0	0	0	6	9	64	21
Per cent of total	2,577	1	2	2	11	11	67	7

$X^2 = 33.778$: d.f. = 20: .02 <P> .05

It will be seen that there is no substantial difference in the image of the nursing profession between girls with different attitudes towards the choice of this occupation. About the same proportions of those favourably disposed and those who have unfavourable attitudes towards nursing see this profession as one which is both of great importance to society and an occupation which offers few self-benefits.

Further, this image of nursing is held by the vast majority of girls in our sample; approximately three-quarters of our respondents agree on this image of the nursing profession.

However, we noted previously that there is a general tendency for girls to see an occupation in the way they would like it to be; to see the job they have chosen as enabling them to achieve the kinds of objectives they want to achieve. Even though there is a high degree of agreement in the perceptions of nursing it is interesting to see in Table 3:14 that girls in category 1, who have definitely decided to become nurses, are much more likely to see the kinds of values they seek as being mediated by nursing than girls who have not chosen this occupation. For example, while 50 per cent of the girls who definitely plan to become nurses (category 1) have the value pattern of Society> Family> Self, about 1 per cent have

the completely opposite configuration of Self> Family> Society. Of this latter group however, one-third see nursing as mediating these values, while only about 4 per cent of the girls who hold these values and have not chosen nursing, see this occupation in this way.

TABLE 3:14
DISPOSITION TOWARDS NURSING AND THE PERCEPTION OF OWN
SOCIETY-FAMILY-SELF VALUE PATTERN IN NURSING

Disposition Towards Nursing	Per Cent of Each Disposition Towards Nursing Category Both Valuing and Perceiving Value Patterns in Nursing:					
	Self > Family > Society	Self > Society > Family	Family > Self > Society	Family > Society > Self	Society > Self > Family	Society > Family > Self
Favourable	33	13	20	50	42	85
↕	9	16	7	32	25	75
	8	12	7	22	27	79
↕	4	5	3	21	27	84
Unfavourable	3	8	7	13	21	75

Finally, as the values held by a girl more closely approximate the modal values of girls choosing nursing, the more likely she is to see nursing as conforming to these values.

With regard to the perception of nursing in terms of intrinsic-extrinsic values, Table 3:15 shows that there is a fairly homogeneous image of nursing and that it mediates intrinsic values; only a small proportion of girls, whether nursing is attractive to them or not, see this occupation as allowing them opportunities to be

TABLE 3:15
DISPOSITION TOWARDS NURSING AND
INTRINSIC-EXTRINSIC VALUES PERCEIVED IN NURSING

Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category Perceiving Values in Nursing:			
		Intrinsic ←		→ Extrinsic	
		Creativity and Self- Development	Self- Development and Security	Security and Self- Pleasure	No Response
Favourable..... 1	220	13	62	23	2
↕ 2	331	9	54	33	2
↕ 3	279	13	53	27	4
↕ 4	633	12	49	34	3
Unfavourable..... 5	1,081	8	45	39	4
No response	33	0	42	42	15
Per cent of total	2,577	10	49	34	3

creative. On the other hand, a greater number of those who do not like nursing tend to see this occupation as offering extrinsic benefits as opposed to intrinsic values. This suggests that among the reasons why girls do not find nursing an attractive occupation is that they see it as involving the kind of work which is not particularly interesting to them and further, that its principal characteristic is that it offers certain benefits which are extrinsic to the actual work involved and these are also less appealing to those who reject nursing.

TABLE 3:16
DISPOSITION TOWARDS NURSING AND THE PERCEPTION
OF OWN INTRINSIC-EXTRINSIC VALUES IN NURSING

Disposition Towards Nursing		Per Cent of Each Disposition Towards Nursing Category Both Valuing and Perceiving Values in Nursing:		
		Intrinsic \longleftrightarrow Extrinsic		
		Creativity and Self-Development	Self-Development and Security	Security and Self-Pleasure
Favourable <div>↑ ↓</div>	1.....	55	83	63
	2.....	36	73	59
	3.....	27	68	40
	4.....	26	62	48
	Unfavourable 5.....	9	58	45

On checking our data to test these hypotheses we find that 21 per cent of those who do not like nursing (category 5) held intrinsic values but only 9 per cent of these saw nursing as mediating these values, while 47 per cent saw nursing as providing extremely extrinsic values. It seems likely therefore that a number of girls do not like nursing because they do not think they would sufficiently like the work involved.

On the other hand, also among those unfavourably disposed towards nursing were 33 per cent who placed great importance on extrinsic values, and of these almost one-half saw nursing as mediating these values, while only 6 per cent had the view that nursing mediated completely different objectives.

Thus, girls for whom the actual work involved in an occupation is an extremely important consideration are unfavourably disposed towards the nursing profession because they think they would not like the work involved; on the other hand, this is not the reason for the unfavourable attitude towards nursing of girls who take a more “instrumental” approach to the evaluation of occupations.

Finally, Table 3:16 again shows that, as with the previous society-family-self values, girls who choose nursing tend to perceive in this occupation the kinds of values they themselves seek.

Summary

In this section we have shown that girls choosing a particular occupation are more likely to agree on the kinds of things they want from their job than they are on the kinds of advantages actually offered by that occupation. We also found that there was a higher degree of consensus among social service occupations both with respect to values preferred and values perceived in those jobs than there was among girls choosing other occupations. Further, generally speaking, girls holding the same values as those held by the majority choosing each occupation, tended more frequently to see the occupation as mediating these values than girls entering the same occupation but holding different values from the modal ones.

The data also show that girls tend to see an occupation as offering the kinds of benefits they want, and thus girls planning to enter any given occupation will differ about their perceptions of the benefits that the job offers, but most of them will see the job as providing these different benefits.

With regard to nursing in particular, we found that the image of nursing among the girls in our sample is very homogeneous, especially with respect to the perception of nursing as an occupation which is important to society, where about three-quarters of our sample agree on this image. The degree of consensus with regard to the extent to which nursing mediates intrinsic-extrinsic values was somewhat less (agreement among 50 per cent of the girls) and, in addition, the data suggest that those with unfavourable attitudes towards the nursing profession are somewhat more likely to see this occupation as offering extrinsic values than those who are favourably disposed towards this occupation.

It should be mentioned here that these conclusions are also supported by the data we obtained from our interviews and, in this latter case, unlike the questionnaire data, the responses were more spontaneously offered by the girls we interviewed and therefore they are somewhat less subject to bias arising from the fact that the questions "suggested" certain answers. Our interview data indicate that the higher the status of the occupation chosen, the more likely will "intrinsic" values be seen as an attractive feature of these occupations; and the lower the status of the job chosen, the greater the likelihood that those planning to enter them will regard extrinsic values as particularly appealing. Further, an attractive feature of low status occupations is the absence of barriers to entry, while a negative characteristic of high status occupations is seen to be the relatively high barriers to entry, particularly the amount of training required.

The characteristic of nursing that is most frequently regarded as being attractive is that it is seen as being of benefit to society. As our questionnaire data show, nursing is seen by those who choose it, as offering both intrinsic and extrinsic values; however, the girls who reject nursing as a career appear to be those who are of the opinion that they would not like the work or receive sufficient satisfaction from performing the duties involved in this occupation.

3. Perceptions of Specific Characteristics of Nursing


In addition to the two classes of values which we called “society-family-self” and “intrinsic-extrinsic”, we included a third class which we called “specific characteristics of the occupation”. We felt that the choice of an occupation would, to some extent, be affected by particular features of the various alternatives that girls saw available to them; such things as whether a job involved shift work and whether the kinds of people with whom one would probably have to associate on the job were the kind who were felt would be congenial. The questionnaire therefore contained some twenty-two statements which included both these kinds of characteristics and some of the other two classes of value statements which we thought were likely to be particularly relevant to the field of nursing. The girls in our sample were asked to indicate: (a) whether or not they thought each one described nursing as an occupation and (b) those which were particularly important as reasons for their feeling that they could not be happy as a nurse.

In Table 3:17, we have shown the proportions of girls in each of the five “Disposition Towards Nursing” categories who said that each of the characteristics listed described the nursing profession.

TABLE 3:17

DISPOSITION TOWARDS NURSING AND PERCEPTIONS OF THE CHARACTERISTICS OF THIS PROFESSION							
Characteristics of Nursing	Per Cent of Each Disposition Towards Nursing Category Perceiving Characteristic in Nursing:						
	Favourable \longleftrightarrow Unfavourable						Total
	1	2	3	4	5	No Response	
Requires a long training period which I would prefer not to have to go through.	5	9	14	21	36	15	23
Provides an opportunity for me to go to nursing school and learn interesting and useful things.	79	83	69	67	49	42	62
Doesn't pay well enough.	5	9	13	9	18	18	13
Provides an adequate income.	67	66	52	58	47	46	54
Is one which people generally don't regard very highly.	2	3	4	3	4	6	3
Is one which people generally regard more highly than other occupations for women.	64	68	57	60	50	46	57
Would involve irregulars hours and shift work which I don't like.	4	12	21	25	41	27	27
Would require me to leave home for a long period.	37	36	25	22	18	6	23
Would enable me to move to a large city and travel.	37	39	31	26	20	24	27

TABLE 3:17 (Concluded)

Characteristics of Nursing	Per Cent of Each Disposition Towards Nursing Category Perceiving Characteristic in Nursing:						
	Favourable  Unfavour- able						Total
	1	2	3	4	5	No Response	
Involves contact with interesting people from vastly different walks of life which I could enjoy.	76	82	70	72	58	64	67
Involves meeting lots of strangers which I don't like very much.	3	4	4	7	9	6	6
Is one in which I wouldn't particularly like other nurses with whom I work..	1	2	4	3	3	0	3
Is one in which I would find other nurses particularly congenial to me..	56	54	44	37	22	18	35
Would give me a sense of security by being with others who would help me if I needed it.	62	60	53	56	37	24	49
Would probably interfere with my marriage plans.	2	4	5	9	9	9	8
Would probably bring me into contact with young men whom I might like to marry.	35	39	35	30	22	36	29
Involves too much discipline and lack of freedom.	4	7	10	12	24	18	16
Requires too much dedication and self-sacrifice.	6	7	9	13	23	15	15
Would give me tremendous satisfaction in knowing I am helping people in need.	97	95	88	84	56	51	75
Involves working in an atmosphere of sickness and death which I don't like.	5	7	19	27	63	24	37
Involves working frequently in situations with unpleasant odours and the sight of blood.	70	71	57	63	72	61	67
Involves a lot of hard physical work.	63	59	53	49	45	46	51

It is interesting to note that the greatest consensus among the girls in our sample concerning the image of the nursing profession occurs in connection with characteristics which have to do with the nurse's relations with others on the job; three out of four girls say that being a nurse would give them tremendous satisfaction in knowing they are helping people in need, while two-thirds say that being a nurse involves contact with interesting people from vastly different walks of life which they would enjoy. Two other characteristics which involve relations with other people are also checked frequently, although there is not as much consensus

as in the case of the first two; 35 per cent see other nurses as particularly congenial to them and 49 per cent feel that being a nurse offers a sense of security by being with others who would help them if they needed it. In other words, the attractive features of the nursing profession about which there is a fairly high degree of agreement are those which relate to the kinds of relationships a nurse has with others with whom she comes in contact during the course of her work.

There is also a fairly high degree of agreement (57 per cent) that nursing is seen by others as having a higher status in our society than other occupations open to women, and also that nursing involves some kinds of work which are unpleasant. In general, the attractive features of nursing are more frequently perceived by the girls in our sample, than are the negative characteristics. The majority of girls see the following features of a nursing career as attractive: 1) the training period, 2) an adequate income, 3) higher prestige than other occupations open to women, 4) meeting interesting people and 5) helping people in need. They also see the duties of a nurse as involving a considerable amount of hard physical work and unpleasant situations in caring for the sick.

It will also be noticed that a much lower proportion of those with unfavourable attitudes towards nursing see attractive features in nursing, and a higher proportion see negative characteristics than do those who plan to become nurses. The features of nursing with respect to which differences of opinion are most marked are as follows:

1) While between two-thirds and three-quarters of the girls who have chosen nursing have positive attitudes towards the training period, income and prestige involved in nursing, and only 5 per cent have negative attitudes, less than one-half of those with unfavourable attitudes towards nursing find these characteristics appealing, while with respect to the last two, between 20 per cent and 40 per cent see them as negative features of nursing.

2) The proportion of those who have unfavourable attitudes towards nursing who are attracted towards this occupation because they like the kinds of interpersonal relations involved in this occupation is also much lower than for girls who have a favourable disposition towards nursing.

3) While almost all girls who plan to become nurses like the idea of being able to help people in need, only about one-half of those unfavourably disposed towards nursing feel the same way.

4) Finally, while only about 5 per cent of those choosing nursing see it as involving too much discipline, lack of freedom, and self-sacrifice, about one-quarter of the girls with unfavourable attitudes towards nursing regard these as undesirable features of this occupation.

The girls in our sample were also asked to indicate which of the above characteristics of nursing were particularly important reasons for their not liking nursing as a career and the responses of those who are not considering this occupation are presented in Table 3:18.

TABLE 3:18
NEGATIVE CHARACTERISTICS OF NURSING PERCEIVED BY
GIRLS UNFAVOURABLY DISPOSED TOWARDS THIS OCCUPATION

Characteristic of Nursing	Per Cent Perceiving Negative Characteristic in Nursing:	
	Unfavourable	
	4	5
Requires a long training period which I would prefer not to have to go through.	10	15
Doesn't pay well enough	3	5
Involves meeting lots of strangers which I don't like very much.	2	4
Would probably interfere with my marriage plans.	3	3
Involves working in an atmosphere of sickness and death which I wouldn't like.	18	46
Involves working frequently in situations with unpleasant odours and the sight of blood.	22	43
Involves a lot of hard physical work.	7	7
Is one which people generally don't regard very highly.	1	1
Is one in which I wouldn't particularly like other nurses with whom I work.	1	1
Involves too much discipline and lack of freedom . . .	7	11
Requires too much dedication and self-sacrifice.	4	7
Would involve irregular hours and shift work which I don't like.	13	18
Would require me to leave home for a long period.	5	4
Would enable me to move to a large city and travel....	2	2

The most outstanding feature of this table is that almost one-half of the girls in category 5 said that a particularly important reason for not liking nursing was that they did not like the atmosphere of sickness and death and the unpleasant sights and odours associated with the job. Other features of nursing which were disliked and which were important reasons for girls not considering it as a career were the long training period required (15 per cent), irregular hours and shift work (48 per cent), and somewhat less frequently, the discipline to which nurses were seen to be subject (11 per cent). It is perhaps somewhat surprising to note that low pay and degree of self-sacrifice required were not cited frequently as important reasons for disliking nursing.

With regard to the girls with unfavourable attitudes towards nursing who said that an important reason for their disliking nursing was the long training period required to enter this profession, an analysis of this group reveals that this attitude is more prevalent among lower class girls than among upper class girls. Of the girls in categories 4 and 5 who indicated this view of nursing, 62 per cent were from families of blue collar and farm workers as compared to 27 per cent from white collar families and only 8 per cent from families of professional men.

Summary

The general characteristic of nursing that appears particularly important in attracting girls into that profession is the fact that it is seen as providing opportunities for congenial relations with other people. Specifically, almost everyone planning to enter nursing says that being a nurse would give her tremendous satisfaction in knowing that she is helping people in need; in addition, the perceived benefits of meeting a variety of interesting people, having congenial colleagues who will help her when she needs it, also attract girls into nursing. The high status of nursing is also seen as an attraction by almost two-thirds of those planning to enter this occupation, as are the advantages of the training and the income received.

For those with unfavourable attitudes toward nursing, the above features were not seen as important advantages by nearly as many girls. In addition, a substantial proportion of them saw nursing as involving particularly negative features including, most importantly, the general atmosphere of sickness and death and objectionable sights and odours, and for some, the irregular hours, the discipline and lack of freedom and, particularly for those from the lower social classes, the lengthy training period required to enter this occupation.

D. SELF-IMAGE AND OCCUPATIONAL CHOICE

Twelve different "personality statements" were presented to our respondents who were asked to indicate whether or not each statement described themselves. On the basis of our responses, it was possible to identify four personality traits (see matrix in Appendix D). These are as follows:

- 1) *"Organizational Competence"*
 - (a) Always has her life well organized.
 - (b) Likes hard work more than most other people do.
 - (c) An exceptionally efficient person.
- 2) *"Interpersonal Competence"*
 - (a) At ease when meeting strangers.
 - (b) Someone to whom others frequently look for help and advice.
 - (c) Able to give orders.
- 3) *"Self-Confidence"*
 - (a) Very feminine.
 - (b) Very intelligent.
 - (c) Adaptable and able to do many things well.
- 4) *"Self-Control"*
 - (a) Likes taking orders from others.
 - (b) A person who can control her emotions in upsetting situations.

These clusters all had relatively high relationships within themselves and relatively low relationships between each cluster. A scale was found for each trait which provided an overall ranking for each girl with respect to it.

Table 3:19 shows the differences in the self-images of girls entering different occupations.

The first thing we notice is that the proportion of girls choosing low status occupations who see themselves as outstanding with respect to these four traits (\bar{x} = 31 per cent) is somewhat less than for girls choosing medium and high status occupations (\bar{x} = 37 per cent). It would seem therefore that girls choosing low status occupations do not evaluate themselves as highly as do other girls.

Secondly, girls entering low status occupations see themselves as considerably less self-confident (16 per cent) than do girls planning to enter higher status occupations (27 per cent).

Girls choosing high status occupations evaluate themselves more highly (59 per cent) than others do (46 per cent and 40 per cent for medium and low status respectively) in terms of interpersonal competence.

While one or two differences are shown with regard to self-evaluations in terms of organizational competence, there do not appear to be any systematic differences of interest to us in this study.

TABLE 3: 19
SELF-IMAGE OF GIRLS CHOOSING VARIOUS OCCUPATIONS

Occupational Choice	N	Per Cent in Each Occupational Class Rating Themselves Above the Median on:			
		Organizational Competence	Interpersonal Competence	Self-Confidence	Self-Control
Physiotherapist	35	43	63	14	31
Occupational Therapist...	12	50	67	17	42
Dietitian	27	44	59	37	22
Social Worker	97	36	65	27	30
Actress, Musician, Artist .	44	32	52	25	27
Writer, Journalist	41	20	54	34	15
Missionary	22	36	50	27	36
School Teacher	612	39	45	30	24
Steno/Private Secretary ..	330	35	37	22	35
Registered Nurse	551	43	53	27	48
Lab/X-ray Technician....	122	40	36	25	24
Airline Stewardess	100	32	51	26	36
Sales Clerk	25	24	24	4	25
Typist/Office Clerk.....	150	40	40	18	35
Practical Nurse	42	24	50	12	40
Beauty Specialist.....	40	30	40	20	38
Other	287	37	46	27	24
No response	39	31	46	21	27
Per cent of total	2,577	38	47	26	33
High Status	278	35	59	27	28
Medium Status	1,715	39	46	27	35
Low Status	257	34	40	16	35

Finally, turning to the characteristic of self-control, we note that girls choosing high status occupations are less likely (28 per cent) to see themselves as possessing this characteristic than girls choosing medium and low status jobs (35 per cent). Further, a considerably higher proportion of girls choosing nursing see themselves as possessing this characteristic to an outstanding degree. In fact, girls planning to enter all the medical occupations, except those of laboratory and X-ray technician, evaluate themselves more highly on this trait than other girls. The fact that only about one-half as many girls planning to become laboratory and X-ray technicians see themselves as possessing this characteristic as compared to those choosing nursing, suggests that this may be seen as a deficiency in relation to the role of a nurse and may therefore be responsible for the choice of the job of technician rather than that of nurse, since the former does not presumably so frequently involve emotionally upsetting experiences.

In general, girls planning to become registered nurses evaluate themselves somewhat more highly on these characteristics, and those choosing practical nursing and the occupations of laboratory and X-ray technician less highly, than other girls. One other difference, for which we lack an explanation is that girls planning to become therapists see themselves as considerably less self-confident than girls choosing other high status occupations and less than those planning to enter other kinds of medical jobs.

Table 3:20 presents the self-images in terms of the four personality traits of girls with favourable and unfavourable attitudes towards nursing.

From this table it would appear that girls who are favourably disposed towards nursing are not significantly different from girls who have unfavourable attitudes towards nursing in the degree of self-confidence that they have. However the more favourable a girl's attitude towards nursing, the more likely she is to see herself as having more organizational and interpersonal competence and more self-control than other girls. Of particular note is the substantial and relatively consistent differences in the proportion of girls who think they have a high degree of

TABLE 3:20
DISPOSITION TOWARDS NURSING AND SELF-IMAGE

Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category Who Perceive Themselves as Having:			
		Organizational Competence	Interpersonal Competence	Self- Confidence	Self- Control
Favourable 1.....	220	51	56	31	56
↑ 2.....	331	38	51	29	44
3.....	278	41	46	27	30
↓ 4.....	634	40	49	29	33
Unfavourable 5.....	1,081	34	43	28	25
No response	33	18	42	15	24
Per cent of total	2,577	38	47	28	33

self-control. The number of girls who have definitely chosen to become nurses who have this self-image is more than twice the number of those who dislike nursing, and we would therefore suggest that a girl's perception that she lacks this ability to control her emotions is an important reason in her rejection of nursing as a career.

We would now like to compare the girls' perceptions of themselves with their perceptions of the type of girl who usually becomes a nurse.

While a smaller number of those girls with unfavourable attitudes towards nursing see each of these characteristics in nurses, the differences are very small and we therefore conclude that in general, the attitude a girl has towards the nursing profession does not affect her perception of the kinds of girls who are nurses. In addition, it is clear that there is a high degree of consensus as to the kind of girl a typical nurse is like. Most girls see nurses as being able to take orders, to control her emotions in upsetting situations and to handle relations with other people competently; to a lesser extent she has the ability to organize herself satisfactorily and that she is self-confident.

As we pointed out at the beginning of this section, the four personality traits used in Table 3:21 were obtained by combining the responses to groups of questions each of which relates to a specific characteristic and, while it is true that, generally speaking, there is a high degree of agreement among the girls in our sample with regard to their image of a typical nurse, there are two interesting differences when we look at the responses concerning specific characteristics of the nurse. The personality characteristics with respect to which we found the greatest disagreement among our respondents were: 1) that nurses are very feminine and 2) that they are very intelligent. Only 47 per cent of our sample thought that nurses were

TABLE 3:21

DISPOSITION TOWARDS NURSING AND IMAGES OF THE NURSE

Disposition Towards Nursing		N	Per Cent of Each Disposition Towards Nursing Category Perceiving Nurses as Having:			
			Organizational Competence	Interpersonal Competence	Self- Confidence	Self- Control
Favourable	1	220	68	88	64	88
	2	331	67	89	58	88
	3	278	65	89	63	88
	4	634	63	87	65	87
Unfavourable	5	1,081	64	86	61	85
No response		33				
Per cent of total.....		2,577	65	88	62	87
Per cent NOT perceiving characteristic in nurses...			29	10	30	9
Per cent don't know			6	2	8	4

very feminine, while 14 per cent did not, and as many as 36 per cent said they did not know. In addition, there is some indication that the more unfavourably disposed a girl is towards nursing, the less likely she is to see nurses as being very feminine (while 52 per cent of those in category 1 agreed with this statement, only 44 per cent of girls in category 5 did). Similarly, although 58 per cent of the girls said that nurses were very intelligent, 7 per cent thought that they were not, and 32 per cent said they did not know.

The data presented in Table 3:22 show that there is a high degree of agreement among all girls concerning the characteristics of a nurse, irrespective of their attitudes towards this occupation. Further, there are no substantial differences in the proportions of those who both see themselves as having certain abilities and also see nurses as possessing them, as between those favourably disposed towards nursing, and those with the opposite attitudes. Thus, the data do *not* support the view that a substantial number of those who dislike nursing do so because, while they have the kinds of abilities that nurses are seen to have, they have an inaccurate perception of the kinds of girls nurses are. Rather, the data in Table 3:22 suggest that the major difference between those with favourable attitudes towards nursing and those who dislike this occupation is that a much smaller number of the latter group see themselves as having the abilities required of a nurse, and this is especially true in the case of the characteristic of self-control.

TABLE 3:22

DISPOSITION TOWARDS NURSING AND THE PERCEPTION OF PERSONALITY CHARACTERISTICS BOTH IN SELF AND NURSES

Disposition Towards Nursing	N	Per Cent of Those Who See Themselves as Having Each Personality Characteristic in Each Disposition Towards Nursing Category Who Also See Nurses as Having It ¹			
		Organizational Competence	Interpersonal Competence	Self-Confidence	Self-Control
Favourable . . . 1	220	(51) 74 (68)	(56) 95 (88)	(31) 74 (64)	(56) 95 (88)
Unfavourable . 5	1,081	(34) 66 (64)	(43) 88 (86)	(28) 59 (58)	(25) 86 (85)

¹ The bracketed figures in the left hand corner of each cell show the proportion of each Disposition Towards Nursing Category seeing *themselves* as having each characteristic, while those in the right hand corner give the proportion who see *nurses* as possessing each characteristic.

Summary

Our data indicate that girls choosing low status occupations tend to evaluate themselves somewhat less highly than girls entering higher status occupations; in particular, we found those choosing high status occupations more likely to be self-confident and to see themselves as having competence in the area of interpersonal relations, than girls choosing lower status jobs.

Girls planning to become nurses appear to rate themselves highly in terms of the personality characteristics with which we dealt. In comparison with girls who have unfavourable attitudes towards this occupation, girls choosing nursing are somewhat more likely to see themselves as having both organizational and interpersonal competence and, especially, to be able to control their emotions in upsetting situations.

Further, although there was a very high degree of consensus among girls concerning the characteristics of a typical nurse, irrespective of their attitudes towards this profession, a significant proportion of those who do not like nursing do not see themselves as possessing the kinds of abilities that girls have who choose this occupation. Of especial importance in this regard is the fact that while almost 60 per cent of the girls who plan to become nurses see themselves as having a high degree of self-control in emotionally upsetting situations, only one-quarter of those who dislike nursing perceived themselves in this way.

E. SUMMARY OF THE CHAPTER

In this chapter we have been dealing with the effects on occupational choice of 1) the kinds of values a girl holds, 2) her perceptions of the occupation chosen and 3) her self-image.

In connection with occupational choice in general, we found that the hierarchy of what we called "society-family-self" values was related to the choice of a social service occupation; specifically, those girls who placed great importance on having a job which was of benefit to society and least importance on satisfying self-pleasures, were much more likely to choose a social service occupation than those with other rank orderings of these values. Further, that differences in intrinsic-extrinsic values were related to the status of the occupation chosen; that the higher the status of the occupation chosen, the greater the importance to a girl that her occupation involve work which is particularly interesting to her, appropriate for her abilities and such as to provide her with opportunities for achievement. On the other hand, the lower the status of the occupation chosen, the greater the likelihood that the girl will make this choice because the job is instrumental in enabling her to achieve certain other objectives, rather than because she is particularly interested in the work entailed in the job. Lastly, we found that, while in most cases the majority of girls choosing a particular occupation will have similar perceptions about the characteristics of that job, other girls are prone to perceive an occupation as providing the kinds of benefits that are important to them.

With regard to nursing in particular, our data show that the majority of girls who choose this occupation place considerable emphasis on having a job which is important to society and much less stress on the need to have a job which provides benefit to the self. Like other medium status occupations, nursing also attracts a high proportion of girls who look for a job which involves work that is interesting to them but which also provides them with security; in other words, their values tend to lie midway between the intrinsic-extrinsic extremes.

Generally speaking, there is a high degree of agreement among the girls in our sample that the occupation of nursing is important to society. There is somewhat less consensus with respect to the kinds of intrinsic-extrinsic values mediated by this occupation but, as with other occupations, girls (particularly those girls who plan to enter this profession) perceive in nursing the kinds of characteristics they themselves value.

On the other hand, while girls with unfavourable attitudes towards nursing agree that nursing is important to society, they place considerably less importance on having a job of this kind. They are also more likely to look for a job which is instrumental in enabling them to secure certain objectives rather than finding work that is particularly interesting to them. In addition, we found that some girls do not like nursing because they do not feel that the work involved would be sufficiently satisfying to them.

In the sample of girls as a whole, a significantly greater number see the characteristics of this profession as being attractive than the number who regard them as unattractive. Girls who have chosen nursing, of course, are especially likely to see nursing as being appealing and the characteristics which are most frequently cited in this connection are: 1) it gives tremendous satisfaction in knowing that nurses are helping people, 2) it provides interesting and enjoyable relationships with other people, 3) it has more prestige than other occupations available to women and 4) it provides the advantage of receiving training and pays an adequate income.

On the other hand, a smaller number of girls with unfavourable attitudes towards nursing see the attractive features of nursing, and a higher proportion regard this occupation as having important negative characteristics. Specifically, a substantial number of those who do not like nursing see this occupation as providing an inadequate income, the inconvenience of irregular hours and shift work, too much discipline and a lack of freedom and, especially among girls from lower class homes, it is frequently thought that the training period is too long and difficult. However, the most important difference between those with favourable and unfavourable dispositions toward nursing is that, while both see this occupation as involving some unpleasant tasks in connection with caring for the sick, those who choose to become nurses think that they are able to cope with such emotionally upsetting situations, while those who do not like nursing do not.

PATTERNS OF SUPPORT AND INFLUENCE AND OCCUPATIONAL CHOICE

In this chapter we will look at the relationship between occupational choice on the one hand, and on the other various types of support and influence to which girls may be subject from parents, relatives, teachers, peers and such things as special nursing recruitment programmes and books. In other words, we shall try to answer the question: "To what extent is a girl's occupational choice affected by the kind of support and/or influence from others?" It should perhaps be pointed out that when we use the terms "support" and "influence" we do not necessarily mean that this is the result of a conscious effort on the part of the initiator to affect the occupational choice of the girl. These processes range from the most direct attempts to influence a girl's choice of a career to the most subtle ones of offering encouragement to a choice already made, for example. In addition, any of these sources may influence a girl's choice merely by the provision of information about occupations.

A. PARENTS

Our questionnaire included the following question: "If you were to decide to become a nurse, how do you think your parents would feel about this? Circle only one number. 1) They would encourage me to become a nurse. 2) They would think it was alright. 3) They wouldn't care one way or the other. 4) They would not particularly like the idea. 5) They would be very much opposed."

In Table 4:1 we present the answers given to this question by girls choosing various occupations.

It is to be noted that the vast majority of girls perceive their parents as supporting their choice of a particular occupation, and only 9 per cent see their parents as actively opposing their choice.

Comparing parental attitudes towards occupational choice as perceived by girls choosing different occupations, the most striking feature of Table 4:1 is the considerably greater parental support received by girls choosing occupations in the medical field, than by those planning to enter other types of jobs. The proportion of girls choosing nursing (both Registered and Practical) whose parents strongly encouraged them in this choice is about 75 per cent, then come Therapists (53 per cent), and Laboratory and X-ray Technicians (49 per cent).

TABLE 4:1

PARENTAL SUPPORT FOR OCCUPATIONAL CHOICE

Occupational Choice	N	Per Cent in Each Occupational Class Receiving Parental Support:					
		Strong Encouragement	Slight Encouragement	Neutral	Discouragement	No Response	Total
Physio- and Occupational Therapists	47	53	30	2	15	0	100
Other High Status Occupations	364	45	31	9	14	1	100
School Teachers	612	39	36	10	14	2	100
Nurses	551	77	17	2	3	1	100
Lab and X-ray Technicians	122	49	26	10	11	4	100
Secretaries	330	46	35	9	8	2	100
Other Medium Status Occupations	155	49	37	8	7	0	100
Practical Nurses.....	42	71	24	5	0	0	100
Other Low Status Occupations	290	43	36	11	8	2	100
Unclassified and No Job Chosen	64	47	28	5	14	6	100
Per cent of total	2,577	52	30	7	9	2	100

$\chi^2 = 235.9; d.f. = 24; P < .001$

It was assumed that the occupation of the girl’s mother before marriage may have some effect on the daughter’s choice of an occupation and Table 4:2 shows the relationship between these two factors.¹

In the case of nursing in particular, some 41 per cent of mothers who were nurses have daughters who plan to enter the same occupation, which is considerably more than one would expect by chance. Further, whereas 41 per cent of the daughters whose mothers were nurses also choose nursing, only 21 per cent of the daughters whose mothers were not nurses plan to become nurses. The fact that a girl’s mother was a nurse therefore has the effect of noticeably increasing the chances that her daughter will choose nursing as a career.

B. PEERS

1. Close Friends

In the questionnaire, the girls were asked to indicate how many among their three best friends were planning to enter the same occupation as the one

¹ See Appendix E for further discussion of the relationship between mother’s occupation and daughter’s occupational choice.

TABLE 4:2
STATUS OF MOTHER'S OCCUPATION BEFORE MARRIAGE AND
STATUS OF DAUGHTER'S OCCUPATIONAL CHOICE

Daughter's Occupational Choice	N	Mother's Occupation Before Marriage:						Per Cent of Daughters in Each Occupational Class
		High Status Occupations	Teach- ing	Nurs- ing	Medium Status Occupations	Low Status Occupations	No Occupation	
High Status Occupations...	411	34	22	26	30	13	11	16
Teaching.....	612	28	30	11	19	22	28	24
Nursing.....	551	17	24	41	19	21	21	21
Medium Status Occupations.	607	11	13	12	25	27	24	24
Low Status Occupations	332	9	9	7	5	15	13	13
No Job Choice.....	64	2	1	4	3	3	2	3
Total and Per Cent of Moth- ers in each Occupational Class	2,577	(2)	(9)	(3)	(9)	(25)	(39)	(100)

$\chi^2 = 147.9$; d.f. = 20; $P < .001$

they themselves had chosen. We then devised a procedure¹ which would enable us to ascertain whether the frequency with which girls had such friends was greater than one would expect by chance. The results are given in Table 4:3.

In general, it would appear that those entering the various occupations included in Table 4:3 do have more close friends who plan to enter the same occupation than one would expect by chance. If we look at nursing in particular, we can calculate the average number of girls going into nursing among the three best friends for girls planning to enter nursing and compare this with the same figure for girls not going into nursing. We find that, on the average, girls choosing nursing have among their three best friends 1.05 who are also going into nursing, while those who do not plan to become nurses have only .86 nurses among their three best friends.

TABLE 4:3
FREQUENCY OF HAVING CLOSE FRIENDS CHOOSING THE
SAME OCCUPATION FOR SELECTED GROUPS

Occupational Choice	N	Average Number of Friends in Same Occupation Expected	Average Number of Friends in Same Occupation Observed	Ratio: $\frac{\text{Observed}}{\text{Expected}}$
School Teacher.....	612	.733	1.126	1.54
Steno/Private Secretary....	330	.376	1.167	3.10
Practical Nurse.....	42	.049	.811	16.55
Registered Nurse	551	.642	1.045	1.63
Social Worker	97	.113	.348	3.08

There is also a relationship between a girl's disposition towards nursing as a career² and the number of her best friends who are nurses. Generally speaking, the following table indicates that the greater the number of best friends who are nurses, the more favourable the girl's attitude towards nursing.

¹ The procedure followed was :

- 1) The proportion of girls in the sample choosing each occupation was taken as an estimate of the total population of high school girls in Canada choosing each occupation.
- 2) The mathematical probability that a random selection of three girls would contain 1, 2 and 3 girls planning to enter each occupation was calculated.
- 3) From these probabilities the *expected* number of girls in a selection of three was calculated.
- 4) This was compared with the actual *observed* average reported by girls in each occupational category.
- 5) The ratio of the expected to the observed frequency was obtained.

² Two of the occupational categories used in our questionnaire included several smaller occupations and it is not possible to apply the method outlined in the previous footnote to these. We have also had to eliminate certain occupations which were only chosen by few girls because the probability of having a friend in that occupation was so extremely small that a small difference between expected and observed frequency would appear unduly large and significant. We have therefore had to restrict our analysis of peer group influence to the occupations included in Table 4:3.

TABLE 4:4
DISPOSITION TOWARDS NURSING AND AVERAGE
NUMBER OF FRIENDS CHOOSING NURSING

	Disposition towards Nursing					Total
	Favourable ←			→ Unfavourable		
	1	2	3	4	5	
Average number planning to become nurses among three best friends	1.05	1.12	1.02	0.92	0.80	0.91
N	220	331	278	634	1,081	2,544
X ² = 60.4: d.f. = 16: P < .001						

At this point the data do not necessarily show that having nurses as friends influences a girl to also want to become a nurse. It is conceivable that the choice of nurses as friends *follows* the decision to become a nurse. However, the data in Table 4:5 constitute evidence in support of the former inference rather than the latter.

TABLE 4:5
NUMBER OF CLOSE FRIENDS CHOOSING
NURSING AND THE CHOICE OF NURSING

Number of Friends Among Three Best Friends who Are Planning to Become Nurses	Proportion of Girls Choosing Nursing
None	16.0
1	23.8
2	25.9
3	27.9

X² = 66.4: d.f. = 3: P < .001

Since there is a consistent increase in the proportion of girls who choose nursing as the number of their school friends who are nurses increases, we suggest that friends do exercise some influence on the choice of nursing as a career. The absolute effect of this factor is not particularly large however.

2. Other Friends Who are Nurses or Nursing Students

Turning now to personal friends who are nurses or nursing students and their influence on the girls' choice of nursing as a career, we see from Table 4:6 that the differences in the proportions of the two groups who choose nursing as a career is extremely small and we may therefore conclude that the factor of having nurses as friends has no noticeable effect on the girls' choice of nursing.

TABLE 4:6
DISPOSITION TOWARDS NURSING AND
FRIENDS WHO ARE NURSES

Having Friends Who Are Nurses	N	Disposition Towards Nursing:						
		Favourable ←					→ Unfavourable	
		1	2	Total Choosing Nursing	3	4	5	Total Not Choosing Nursing
Per cent of those having nurses as friends	1,378	9	14	23	12	25	39	76
Per cent of those not having nurses as friends	1,110	8	12	20	10	24	46	80

$X^2 = 12.7; d.f. = 8; .10 P < .20$

C. FAMILY, FRIENDS AND RELATIVES

The questionnaire included an item which requested girls in our sample to indicate whether they had any relatives or close family friends in the same occupations that they had chosen. To ascertain the importance of this factor in a girl's choice of an occupation by comparing the frequency of friends and relatives in the same occupation as that chosen by the girls, we must control for the frequency with which each occupation is found in the population at large, since a girl is more likely to have a friend or relative working in one of the more common occupations such as teaching or nursing than in one of the less popular jobs such as occupational therapist or dietitian. While it is less easy to control for these differences in the case of relatives and friends than it was for peers, we can get some idea of the role of such influences by comparing the relative proportions of girls entering each occupation who say that they have such relatives or friends and *that they admired them*.

Taking our sample as a whole, it will be seen that the majority of girls have relatives and family friends whom they particularly admire in the same occupation as the one they have chosen, which suggests that these people are important in the matter of occupational choice.

There are two rather surprising features of Table 4:7. First, although secretarial and office work, teaching and nursing are the more common occupations for women and therefore girls choosing them would be more likely to have relatives and friends in them, in fact we find the proportions for these groups lower, generally speaking, than for other less common occupations. (The main exception is the occupation of sales clerk). The relatively high proportions in Table 4:7 for the less common occupations suggest that for these jobs the existence of relatives and family friends in the same occupation is particularly important in the choice of these occupations.

TABLE 4:7
PROPORTION CHOOSING EACH OCCUPATION
HAVING RELATIONS AND FRIENDS IN SAME OCCUPATION

Occupation Chosen	N	Per Cent Choosing Each Occupation Who Had Relatives or Friends in Same Occupation and:			Per Cent Choosing Each Occupation Who:	
		Particu- larly Admired Them	Admired Them No More than Most Other Relatives and Friends	Total With Relatives and Friends in Same Occupation	Did Not Have Relatives and Friends in Same Occupation	No Response
Physiotherapist..	35	80	11	91	6	3
Occupational Therapist.....	12	92	8	100	0	0
Dietitian.....	27	70	15	85	7	7
Social Worker....	97	73	11	84	6	9
Actress, Artist, Musician	44	68	16	84	11	5
Writer/Journalist.	41	76	15	91	2	7
Missionary	22	55	23	78	18	5
School Teacher..	612	40	29	69	22	9
Steno/Private Secretary	330	49	21	70	22	8
Registered Nurse	551	39	35	74	18	8
Lab/ X-ray Technician	122	80	7	87	6	7
Airline Stewardess	100	79	9	88	9	3
Sales Clerk	25	72	4	76	8	16
Typist/Office Clerk	150	50	23	73	22	5
Practical Nurse..	42	38	26	64	26	10
Beauty Specialist	40	63	15	78	15	8
Others.....	288	72	14	86	7	7
No response and unclassifiable .	39	72	5	77	3	21
Per cent of total .	2,576	53	23	76	16	8

$X^2 = 272.0$; d.f. = 36; $P < .001$

Further, it is to be noted that girls choosing the less popular jobs, generally speaking, also admire these relatives and friends more frequently than girls choosing the more well-known occupations. These two findings would seem to indicate that knowledge about, and attraction for, the less well-known occupations derives much more frequently from relatives and friends than is the case for the more commonly known occupations, including nursing, which have other sources of information and influence.

If we now take a closer look at the importance of this factor in the choice of nursing as a career, we see in Table 4:8 that there is some difference in the

proportion of the two groups (those having family, friends or relatives who are nurses as compared with those who do not), who want to enter the nursing profession, which suggests that the influence of such people on occupation choice is somewhat more than that of the girl's personal friends who are not close friends.

However, the differences again are not particularly large which indicates that this source of influence is not especially important in affecting girls' career decisions.

TABLE 4:8
DISPOSITION TOWARDS NURSING AND HAVING
FAMILY FRIENDS AND RELATIVES WHO ARE NURSES

Disposition Towards Nursing:								
Having Relatives and Family Friends Who are Nurses	N	Favourable<----->----->Unfavourable						Total Not Choosing Nursing
		1	2	Total Choosing Nursing	3	4	5	
Per cent of those having family friends or relatives who are nurses.....	1,562	10	14	24	12	24	39	75
Per cent of those who do not have family friends or relatives who are nurses	946	6	11	17	10	26	46	82

$\chi^2 = 20.6$; d.f. = 4; $P < .001$

D. SCHOOL TEACHERS

Another source of support or influence with respect to occupational choice may be a girl's school teachers. With this in mind, girls were asked if any of their high school teachers had ever told them that they had the ability to enter the occupation they had chosen.

First, it is interesting to note (Table 4:9) that the higher the status of the occupation chosen, the more likely that the girl experienced support from her teachers for that choice. The proportions of those choosing each class of occupation who indicated receiving support from teachers are: high status occupations: 53 per cent; medium status: 42 per cent; and low status: 32 per cent.

Within the medium status group of occupations, 53 per cent of those planning to become teachers received support from teachers, while only 35 per cent of those choosing other medium status occupations said they received such support.

The support that teachers give to nursing appears to be about the same as that given to those choosing other medium status jobs, except teaching, where it is much higher.

TABLE 4:9
PROPORTION CHOOSING EACH OCCUPATION
RECEIVING SUPPORT FROM TEACHERS

Occupation Chosen	N	Per Cent of Each Occupational Class Receiving Teacher Support:		
		Yes	No	No Response
Physiotherapist	35	37	60	3
Occupational Therapist.....	12	33	58	8
Dietitian	27	59	37	4
Social Worker	97	50	47	3
Actress, Musician, Artist	44	71	25	5
Writer/Journalist	41	71	27	2
Missionary	22	32	68	0
School Teacher	612	53	45	2
Steno/Private Secretary	330	31	67	2
Registered Nurse	551	37	59	3
Lab/X-ray Technician.....	122	39	57	4
Airline Stewardess.....	100	31	66	3
Sales Clerk	25	24	72	4
Typist/Office Clerk.....	150	37	62	1
Practical Nurse	42	43	52	5
Beauty Specialist.....	40	10	90	0
Other	287	41	56	3
No response and unclassified	39	28	59	13
Per cent of total	2,576	42	56	3

$X^2 = 117.354$; d.f. = 18; $P<.001$

E. PROGRAMMES OF NURSING

Our respondents were asked to indicate on the questionnaire whether they had attended any of the programmes on nursing that are often sponsored by schools of nursing and high schools, and also whether the respondent’s reaction to the programme was favourable, unfavourable or indifferent. Thirty-six per cent of the girls in our sample had attended such programmes of whom 72 per cent (26 per cent of the sample) had favourably reacted to this experience and 28 per cent unfavourably (10 per cent of the sample). Table 4:10 shows for each of these three groups, the proportion with different dispositions towards nursing and the proportions choosing and not choosing nursing as a career.

Of those who attended nursing programmes and reacted favourably to it, 48 per cent decided to become nurses, while among those who did not attend such programmes, only 14 per cent chose nursing. A word of caution should be given here concerning the conclusions one draws from these figures with respect to both the proportions favourably and unfavourably impressed by these nursing programmes and also the influence on career choice. It is possible that a higher proportion of those who tend to be favourably inclined towards nursing decide to go to these programmes than do those who are not attracted towards nursing, which would

tend to produce higher proportions of those having favourable reactions to the programmes and a higher proportion of this group choosing nursing, than if all girls had experienced these programmes. At all events, approximately one-quarter of our sample did attend a programme on nursing, and of these about two and a half times as many were favourably impressed as were unfavourably impressed. Of the group who reacted favourably, about one-half finally chose nursing as a career, the other half did not. Of all the girls who chose nursing as a career, 54 per cent had attended a programme on nursing and all but one per cent had been favourably impressed by it. However, it is not possible for us to say how many of the 54 per cent would not have wanted to become nurses if they had not attended a nursing programme. Further, the fact that between one-quarter and one-third of those who did go were unfavourably impressed, and that more than one-half who were favourably impressed did not choose nursing, should be borne in mind when assessing the importance of this factor in influencing the choice of nursing as a career.

TABLE 4:10
DISPOSITION TOWARDS NURSING AND
ATTENDANCE AT NURSING PROGRAMME

Disposition Towards Nursing:								
Attendance at Nursing Programme	N	Favourable ←						Unfavourable
		1	2	Total Choosing Nursing	3	4	5	Total Not Choosing Nursing
Per cent of those who attended nurs- ing programme and had favoura- ble reaction,	615	21	27	48	16	23	13	52
Per cent of those who attended nurs- ing programme and had unfavou- able or indiffer- ent reaction,	245	0	2	2	7	19	71	97
Per cent of those who did not at- tend nursing pro- gramme,	1,521	5	9	14	9	26	50	85

$X^2 = 517.1$: d.f. = 8: $P < .001$


F. FAMILY DOCTOR

Our respondents were asked whether they had ever talked with their family doctor about nursing and in this case, as with attending programmes of nursing, any differences in the frequency of such contacts between those who chose nursing and those who did not, may be the result of the fact that more girls

who plan to become nurses make an effort to talk to their family physician about nursing, than those who do not intend to enter the nursing profession. In these circumstances, the same note of caution given in the preceding section should be observed in this one.

Thirty-two per cent of our sample reported that they had discussed nursing with their family doctor. Of these, 32 per cent eventually chose nursing, while 68 per cent chose other occupations. The 32 per cent who eventually chose nursing and talked with their family doctor represent 57 per cent of all girls planning to go into the nursing profession.

TABLE 4:11
DISPOSITION TOWARDS NURSING AND
TALKING WITH DOCTOR ABOUT NURSING
Disposition Towards Nursing:

Talked with Family Doctor about Nursing	N	Favourable  Unfavourable						Total Not Choosing Nursing
		1	2	Total Choosing Nursing	3	4	5	
Per cent of those who talked with family doctor about nursing	811	15	17	32	13	24	30	68
Per cent of those who did not talk with family doctor about nursing	1,712	6	11	18	10	25	48	82

$X^2 = 124.8$: d.f. = 4: $P < .001$

G. BOOKS

Once again, the fact that a girl who both chooses nursing as a career and reads a book about a nurse or the nursing profession, may not mean that the book has influenced her occupational choice, but that the latter leads her to read about it.

An important feature of Table 4:12 is that 80 per cent of all girls in our sample had read a book about the nursing profession. However, even though the proportion of those who choose nursing (24 per cent) is greater than for those who have not read such a book, it is hardly any higher than the proportion of the entire sample who choose nursing. The table suggests therefore that, generally speaking, most girls read books which deal with the nursing profession and that it has little effect in persuading girls to become nurses.

TABLE 4:12
DISPOSITION TOWARDS NURSING AND
HAVING READ A BOOK ABOUT A NURSE

Disposition Towards Nursing:

Read a Book About a Nurse	N	Favourable \leftarrow Total Choosing Nursing \rightarrow Unfavourable						Total Not Choosing Nursing
		1	2		3	4	5	
Per cent of those who read a book about nursing..	2,915	10	14	24	11	25	39	75
Per cent of those who did not read a book about nursing..	505	5	6	11	11	23	54	88

$X^2 = 51.2$; d.f. = 4; $P < .001$

H. INTERVIEW DATA ON INFLUENCE AND SUPPORT AND OCCUPATIONAL CHOICE

In addition to the information just presented based on data from questionnaires, more detailed information was sought in interviews with a sub-sample of about 250 high school students and others in the first year at hospital schools of nursing. While this material will be discussed at greater length in Chapter VI, we wish to indicate the extent to which our interview data confirm and elaborate upon the findings so far presented in this section. Because of the relatively small number of girls interviewed, we will merely indicate our general conclusions from these data without providing the many tables on which they are based.

1. Play Activities

From the interviews undertaken before this project was begun, it appeared that a large number of girls considered nursing as a career at a very early age and as will be shown later, this was confirmed by data collected subsequently. In the circumstances, the girls who were interviewed were questioned about the kinds of early play activities in which they engaged, to what extent they involved games where they took the role of a teacher or nurse, and the extent to which parents encouraged or supported them in these play activities. These data were analyzed to see what part these activities played in the consideration and eventual choice of a career.

In general, it was found that girls who assumed the roles of nurse or teacher in early play activities tended to consider these occupations as careers earlier than girls who do not participate in such games. In the case of nursing, only a small proportion of those who choose this occupation after the age of thirteen, recall having engaged in this kind of play activity. Among those who did play

at this type of role-taking, the greater the degree of parental encouragement or support for it, the greater the likelihood that she will eventually choose that occupation. In addition, a lower proportion of girls who received parental encouragement for playing the nursing role tended to consider alternatives to this occupation, and a higher proportion eventually choose nursing as a career.

2. The Presence of Occupational Models

Girls were asked about the existence of relatives or family friends who had occupations that they had chosen. Our data suggest that the presence of such occupational models is not very important in affecting the girl's choice of an occupation. However, it does appear that having such a relative or friend who is a nurse or teacher is associated with whether a girl engages in play activity in which she plays these roles.

3. Principal Events Leading to the Consideration of an Occupation

We endeavour to ascertain from our respondents whether their consideration of the occupation they had chosen could be traced to a particular event or factor and, if so, the nature of it; in most cases, a single factor which was principally responsible for considering an occupation was identified by the girls interviewed. For girls choosing low status jobs and the medium status occupations of secretary and airline stewardess, suggestions or actions of peers were most frequently cited as the reason for considering the occupation they had chosen. The responses of girls planning to enter high status occupations, on the other hand, were more heterogeneous and include a wider range of factors. With regard to those choosing teaching and nursing, a much higher proportion of these girls were unable to say what were the principal reasons for their considering these occupations, which is probably due to the fact that a substantial proportion of them choose these occupations when they are quite young, and this also accounts for the fact that those who can recall what led them to consider these occupations, most frequently said that it was suggested by their family. In the case of girls choosing teaching, personal experiences or experiences in school are also frequently mentioned.

It is also interesting to note that girls choosing low status occupations are more frequently those who have been blocked in pursuing some earlier occupational choice than is the case for girls choosing medium and high status occupations.

4. Marriage Plans

Do a girl's marriage plans have an effect on her choice of an occupation? If we compare girls who have definite marriage plans with those who do not, we find that girls planning to get married are more definite about their choice of an occupation and more likely to have chosen a low status job. It is not possible to infer from these findings which is cause and which effect, or whether both are function of an entirely different factor; all that we can say here is that there is a tendency for these things to be associated.

5. The Reaction of Others Towards the Choice of an Occupation

We find that the degree of parental support differs markedly for girls choosing jobs with different statuses. More than one-half of the girls choosing teaching and nursing say that they received strong encouragement from their parents as compared to only one-quarter of those planning to enter high status and other medium status occupations, and only one-sixth of those choosing low status occupations. This suggests that, generally speaking, parents prefer to see their daughters choose the most popular occupations for women which have fairly high prestige, and are less enthusiastic when their daughters plan to enter both high and low status occupations.

The reactions of other relatives are similar to those of parents. However, with regard to the reactions of others who are not relatives, we find that support from school teachers and counsellors is more frequently given to girls choosing high status occupations and teaching, than to girls choosing other kinds of jobs. Girls choosing nursing, on the other hand, are more likely to obtain support from peer group friends in addition to the support of family members already referred to.

6. Sources of Information About Occupations

The importance of different sources of information about occupations varies with the age of the girl. Overall, the most frequently mentioned sources of information were: 1) printed materials in the form of pamphlets, letters, catalogues, etc., 2) personal experiences involving contact with an occupation or persons in it and 3) the girl's own family and relatives. Family and relatives appear to be most important when the girl is young, while printed materials become more important at a later age.

When we compare the relative importance of these sources of information for girls choosing different kinds of jobs, we find that the differences are not marked, except for the fact that girls choosing low status occupations appear to rely more on informal sources of information such as family and friends, and less on formal sources like printed materials, than do girls choosing high status occupations.

Different sources of information have different kinds of effects on occupational choice. In general, it can be said that the more personal and informal sources are more likely to lead to increased interest in an occupation. Printed materials ranked particularly low in this respect, while school teachers and counsellors ranked especially high. This latter finding should be considered in conjunction with the previous one, that the influence of school teachers is most frequent in the case of girls who choose teaching and high status occupations, and considerably less important in the case of girls choosing nursing.

The source of influence that is most likely to have the opposite effect of reducing interest in an occupation is that of personal experiences or contacts with an occupation. In other words, the source which would appear to provide most complete and reliable information about an occupation seems to be the one that has the greatest effect in turning girls away from it.

I. SUMMARY OF THE CHAPTER

In this chapter, we have presented data from responses to a questionnaire and from interviews with a sub-sample of about 250 girls, in order to assess the importance of various potential sources of support or influence on the choice of an occupation by girls in our sample. The kinds of influence and support with which we have dealt are:

- 1) Play activity involving the assumption of an occupational role;
- 2) Parental encouragement of such play activity;
- 3) Parental encouragement and support of a particular occupational choice;
- 4) Mother's occupation before marriage;
- 5) Close friends and peers;
- 6) Friends who are nurses;
- 7) Relatives and family friends who are nurses and provide occupational models;
- 8) High school teachers and counsellors;
- 9) Marriage plans;
- 10) Programmes of nursing;
- 11) Talks with family doctor;
- 12) Books and other printed material.

Exposure to some of these potential sources of support or influences is a matter over which the girl has no control, such as having a mother or relatives in a particular occupation; in other cases however, the girl can, and may, exercise a considerable degree of control, such as attending a programme on nursing, talking to her family doctor or reading a book about nursing. As mentioned repeatedly in this section, considerable caution must be exercised when drawing conclusions from data concerning these last three factors, since the fact that she is favourably disposed towards nursing may be the reason for her selectively exposing herself to such sources of influence rather than the other way around.

While many of the above sources of potential influence were considered solely in relation to the choice of nursing, some were examined for their effect on occupational choice in general. In this latter respect our conclusions are: that the most important influences on a girl's choice of an occupation are the kind of parental support she receives for her choice, her mother's occupation before marriage and the influence or support of close friends and peers; the latter is particularly important in stimulating interest in low status occupations and for girls who choose an occupation at a relatively late age. The influence of high school teachers and counsellors is important for girls choosing teaching as a

career and for those choosing high status occupations. Formal sources of information such as books and other printed material are less important for those who choose low status occupations and more important for girls choosing medium and high status jobs, when the choice is made at a relatively late age.

Finally, we noted that girls who had definite marriage plans tended to choose low status occupations, although we are unable to state what the relationship is between these two events.

Turning now to the importance of these factors for the choice of teaching and nursing, we found that :

1) Relatives and family friends who provide occupational models are not particularly important in directly affecting girls' occupational decisions, but the existence of these models does tend to increase the likelihood that such girls will play games in which they assume the occupational roles of teacher and nurse and, of these girls, a larger proportion will consider these occupations at an early age.

2) Parental encouragement of play activities of this kind and parental support of a girl's choice of teaching or nursing increases the probability that she will eventually choose these occupations.

3) Daughters of mothers who were nurses or teachers are more likely to choose these occupations than girls whose mothers had different occupations.

In general then, family influences are particularly important both in stimulating an initial interest in teaching and nursing and in influencing their eventual choice. As will be shown later, this is primarily because the consideration of these two occupations more frequently occurs at an early age than is the case for other occupations, and thus these familial influences are more important for those girls choosing these occupations at an early age than they are for those who make these choices later.

4) Close friends and peers are an important influence for those choosing nursing, particularly when the choice is at a later age.

5) On the other hand, high school teachers and counsellors do not appear to exercise any substantial influence on girls choosing nursing, but they do with respect to girls who plan to become teachers and are frequently important in stimulating an initial interest in this occupation.

6) Finally, it must be emphasized that inferences from our data that attendance at programmes of nursing, talks with the family doctor about nursing, and reading books and other literature on the nursing profession encourage the choice of this occupation, and we must take into account the possibility that these activities proceed from the choice of nursing rather than account for it. In any case, our data suggest that these sources of influence are not particularly important in affecting the decisions of girls with respect to the choice of nursing as a career.

In conclusion, we would point out that no one of the factors dealt with in this chapter can be held to account by itself for the choice of nursing by girls in

general. However, for some girls, one or other of the sources of influence and support may be a very important reason for their choice of nursing. We are here pointing to a difference between what might be called the "potency" of a factor on the one hand, and its "net effect" in terms of influence on the other. For example, if a girl has a mother who was a nurse before she was married, the chances of her choosing nursing as a career are more than twice as great as in the case of a girl whose mother was not a nurse; in this sense, this factor is a potent influence on the choice of nursing. However, only about six per cent of the girls in our sample had mothers who were nurses, and thus the net effect of this factor on the total supply of nurses is very small. In our judgement, therefore, there are several ways in which girls are encouraged or influenced to choose nursing as a career; some are affected by one, some by each of the others, but no one factor influences all girls who choose nursing.

SUMMARY OF FACTORS AFFECTING OCCUPATIONAL CHOICE

This chapter summarizes the findings reported in the previous four chapters and outlines the rough model that they suggest, which is useful in explaining occupational choice in general and nursing in particular.

First, the combined index of three social background characteristics, including 1) father's occupation and educational level attained, 2) urban-rural residence and 3) high school grades, was closely related to a girl's educational plans after high school, and all of these were related to the status of the occupation she had chosen. Further, the kind of occupational values or objectives that a girl seeks is also related to the status of the job she chooses. There is also a relationship between social background characteristics (especially social class and high school grades), and occupational values held. Specifically, we find that the higher the score on the "C-R-G" index, the greater the importance of intrinsic values and the lower the "C-R-G" index, the greater the importance of extrinsic values.

This series of findings suggests that the process of occupational choice involves two stages; that first, a girl narrows the range of available occupational alternatives by seeing jobs in a particular occupational status category as legitimate aspirations for her, and then she makes a choice between the jobs within the appropriate occupational status category. We are not suggesting that this process is necessarily a conscious one in which the reasoning process is clearly perceived. We suggest that a girl's choice of a particular occupational status category is a function of the kind of educational plans she has for the period after high school (rather than the reverse) and that these educational plans, and therefore her choice of an occupational status category, are affected by the social background from which she comes. In other words, the configuration provided by the characteristics of the social class position of her parents, whether she lives in an urban or rural area, and the amount of academic ability she has (each of which is related to the other), significantly affects the amount of formal education a girl will receive and thus will determine the kind of job she will plan to enter.

Since we were primarily interested in the choice of nursing as a career, the following analysis is to some extent restricted to this occupation and others that are like it in some respect.

The choice of a particular occupation within each of these status groups is affected by the kind of value hierarchy a girl has, and her perceptions of the extent to which an occupation enables her to achieve these objectives. We found that girls who place different amounts of importance on the "society-family-self benefiting values" tend to choose different jobs within a particular status category. For example, nursing will be chosen primarily by girls for whom society-benefiting values are most important, although it will also be chosen by some girls with somewhat different values. The latter however tend to perceive that occupation as one mediating their values rather than those of the others. In particular, we found that girls ranking society-benefiting values above both of the other two, tended to select social service oriented occupations like practical nursing (in the low status category), registered nursing and laboratory and X-ray technicians (in the medium status category), and occupational and physiotherapy and social work (in the high status category). Here, although the girl's values are to some extent related to the three social background characteristics used before, they are much more closely related to the degree of her religious participation.

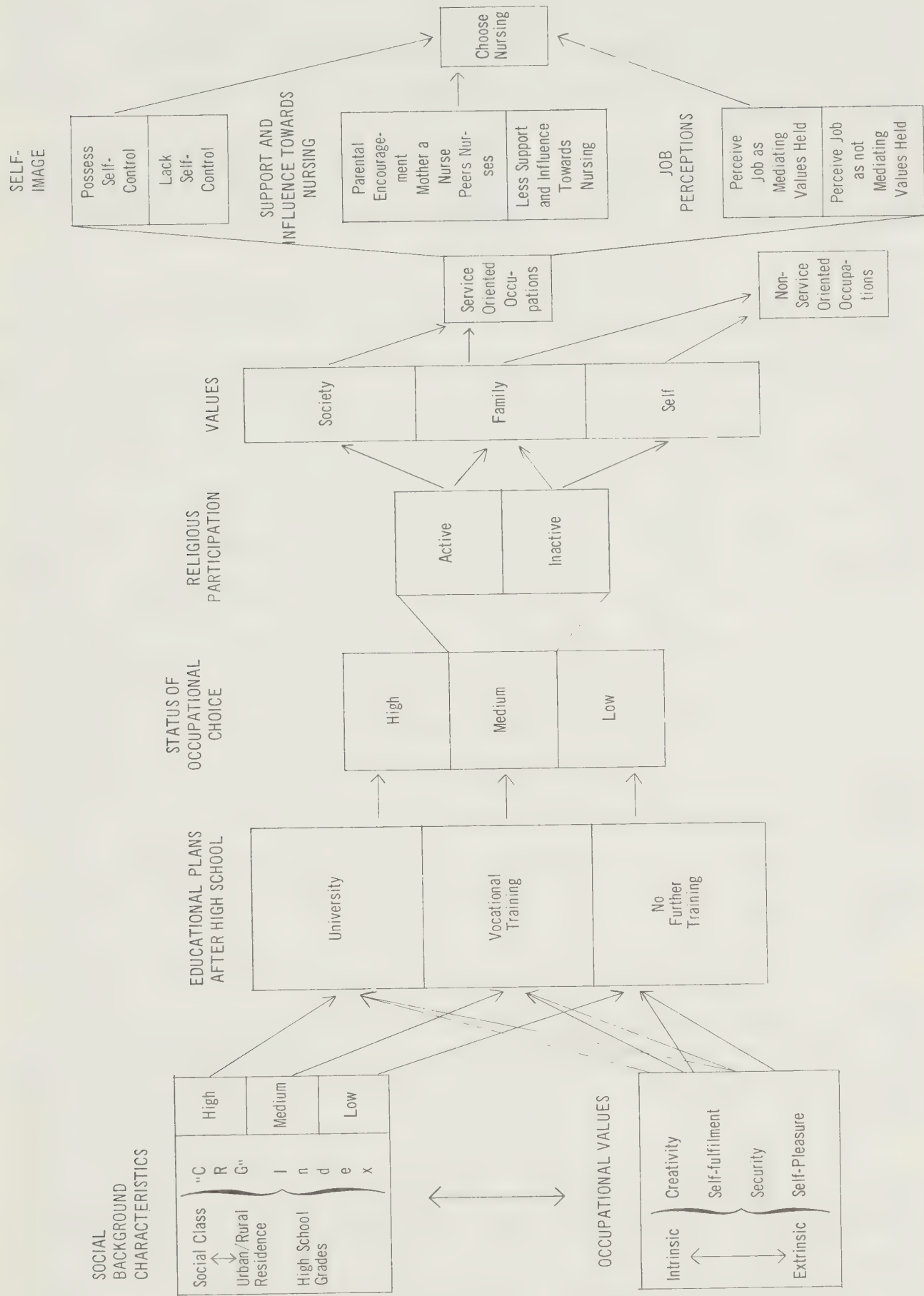
The choice of registered nursing as a career, as one among several social service oriented occupations in the medium status category, is primarily a function of whether the girl sees herself as a person who can exercise the necessary emotional control when faced with the unpleasant and anxiety-creating experiences, such as sickness, injury and death.

Finally, the probability that a girl will choose nursing as a career is increased, the greater the amount of support and influence she receives from others for this particular choice; for girls whose choice of nursing is made when they are very young, the influence of members of the family is especially important, while for those whose decision is made at a later age, the support of persons outside the family, such as peers and teachers, is more important.

The following diagram presents schematically the conceptual framework outlined above, and shows the relationship between the various factors and the suggested causal sequences.

In summary, nursing is more likely to be chosen as a career by girls from the middle class families, in medium-size towns, who have average grades, who participate regularly in religious activities and want to have a job that they regard as important to society and that helps people in need. These girls also want an occupation which provides them with security and an opportunity for self-development. They see themselves as being able to control their emotions in the kinds of upsetting situations they expect to encounter as a nurse. They have experienced support and encouragement, particularly from members of their family for their choice of this occupation.

Although girls with these characteristics were more likely to choose nursing than other girls, some did not in fact plan to become nurses. In addition, some girls planned to enter nursing who did not fit the above description. In order to try to account for the occupational choices of these two groups of girls, we compared (a) those



who "*should*" have chosen nursing (i.e., who had the same characteristics¹ as the majority of girls planning to become nurses) but who did *not*, in fact, choose nursing with (b) those who did choose nursing but who "*should not*" have done so (i.e., did not possess the appropriate characteristics of those choosing this occupation), in terms of various factors.

It is apparent from Table 5:1 that the perceptions of nursing of girls who should not have chosen nursing, but who did, are substantially different from those who should have become nurses but who nevertheless decided against this occupation.

In the first place, as might be expected, a higher proportion of the girls who unwisely choose nursing see the attractive features of this job, as compared to those who do not want to be nurses. However, those in the first group who choose nursing are also much more likely to see negative features in this occupation than those who reject it (Table 5:2). Further, when asked which characteristics of nursing they particularly dislike, a higher proportion of the first group mention such negative features than in the second group. Apparently these girls are not only different from most other girls in terms of what they want in an occupation and in their self-image, but a great number of them also strongly dislike certain characteristics of nursing, and yet they choose this occupation. On the other hand, girls who have the same objectives and self-image as those who plan to become nurses, but who do not choose this occupation, are less likely to see both attractions and negative features in nursing; they are relatively more neutral in their evaluations of nursing. There is an exception to this latter pattern: almost one-quarter of the girls who should have chosen nursing, but who did not, indicated that the expectation of unpleasant experiences was a particularly important reason for their disliking nursing. This is surprising since these girls are among those who see themselves as having the ability to control their emotions in upsetting situations. Possibly the reason why these girls do not choose this occupation is that its attractive features are not sufficient to compensate for the effort required to cope with the emotionally disturbing situations.

Turning again to girls who choose nursing, even though their occupational objectives and self-image are inappropriate for this occupation, or at least different from those of the majority of girls who plan to become nurses, since a relatively high proportion of these girls see important negative features in nursing, as well as attractive ones, one might well wonder why they decided to become nurses.

Their choice of nursing does not appear to be the result of differences in actual or perceived scholastic ability. We therefore looked at the amount of support or influence that they experienced. While these girls are somewhat more

¹Girls in group (a) are those for whom the occupational values of "self-development" and "security" were most important and for whom "society-benefiting" values were more important than either family or self-benefiting values, and who saw themselves as able to control their emotions who did *not* however choose nursing as a career. Girls in group (b) are girls who did *not* have these values and self-image, who nevertheless *did* choose nursing.

TABLE 5:1

COMPARISON OF THE PERCEPTIONS OF NURSING HELD BY
SELECTED GROUPS CHOOSING AND REJECTING NURSING

Per Cent of Each Group Perceiving Characteristic
in Nursing:

Characteristics of Nursing	Girls Who Should Choose Nursing and Did	Girls Who Should Choose Nursing and Did Not	Girls Who Should Not Choose Nursing and Did
<i>Attractive Features</i>			
Opportunity to go to nursing school and learn interesting and useful things. . .	82	63	82
Provides an adequate income.	68	50	68
Involves contact with interesting people.	79	67	85
Bring me into contact with marriageable men.	37	25	30
Tremendous satisfaction in helping people.	97	89	92
Regarded more highly than other occupations for women.	67	55	63
Find other nurses congenial to me. ...	58	32	50
Give me some sense of security by being with others who would help me if I needed it.	63	59	60
Require me to leave home for long period.	36	19	48
Enable me to move to large city and travel.	40	23	46
<i>Negative Features</i>			
Requires long training period.	4	14	20
Doesn't pay well enough.	5	8	16
Involves meeting lots of strangers. ...	2	3	13
Probably interfere with my marriage plans.	1	5	9
Involves working in situations with unpleasant odours and the sight of blood.	72	60	74
Involves much hard physical work. ...	63	47	70
Is one people don't regard very highly.	2	2	6
Is one in which I wouldn't particularly like other nurses with whom I work. . .	1	4	6
Involves too much discipline and lack of freedom.	4	10	16
Requires too much dedication and self-sacrifice.	4	10	16
Involves irregular hours and shift work	4	11	24
N	250	225	250

TABLE 5:2

COMPARISON OF PERCEIVED NEGATIVE CHARACTERISTICS IN
NURSING FOR SELECTED GROUPS CHOOSING AND REJECTING NURSING

Per Cent of Each Group Perceiving
Characteristic in Nursing:

Characteristics of Nursing	Girls Who Should Choose Nursing and Did	Girls Who Should Choose Nursing and Did Not	Girls Who Should Not Choose Nursing and Did
<i>Negative Features</i>			
Requires long training period	2	8	12
Doesn't pay well enough	0	3	12
Involves meeting lots of strangers...	1	0	11
Probably interfere with my marriage plans	0	1	3
Involves working in situations with unpleasant odours and the sight of blood	5	21	13
Involves much hard physical work...	2	6	4
Is one people don't regard very highly	0	0	3
Is one in which I would not particu- larly like other nurses with whom I work	0	0	6
Involves too much discipline and lack of freedom	1	5	12
Requires too much dedication and self-sacrifice	2	2	7
Involves irregular hours and shift work	1	7	20
N.....	250	225	250

TABLE 5:3

COMPARISON OF PROPORTIONS OF GIRLS HAVING FRIENDS PLANNING TO
ENTER NURSING FOR SELECTED GROUPS CHOOSING AND REJECTING
NURSING AS A CAREER

Selected Group	N	Per Cent of Each Group Having Friends Planning to Enter Nursing:				
		None	One	Two	Three	No Response
Girls with "nursing charac- teristics" who choose nursing	250	27	36	22	12	3
Girls with "nursing charac- teristics" who do NOT choose nursing.....	225	33	36	17	9	5
Girls who lack "nursing characteristics" who choose nursing.....	250	29	40	17	11	2

likely to have close friends who are also either already in nursing or planning to enter this occupation than girls who reject nursing, the differences are very small (Tables 5:3 and 5:4).

However, as seen in Table 5:5, girls whom we would regard as unlikely to choose nursing but who nevertheless do so, seem to receive substantially more parental encouragement than those who reject this occupation.

TABLE 5:4

COMPARISON OF PROPORTIONS OF GIRLS HAVING PERSONAL FRIENDS WHO ARE NURSES FOR SELECTED GROUPS CHOOSING AND REJECTING NURSING AS A CAREER

Selected Group	Per Cent of Each Group Having Personal Friends who Are Nurses:			
	N	Yes	No	No Response
Girls with "nursing characteristics" who choose nursing.....	250	59	39	2
Girls with "nursing characteristics" who do NOT choose nursing.....	225	57	40	3
Girls who lack "nursing characteristics" who choose nursing.....	250	60	36	4

TABLE 5:5

COMPARISON OF PARENTAL ATTITUDES TOWARDS THE CHOICE OF NURSING FOR SELECTED GROUPS CHOOSING AND REJECTING NURSING AS A CAREER

Selected Group	N	Per Cent of Each Group with Parental Attitude Toward Entering Nursing:					
		Encourage	Alright	Wouldn't Care	Would Not Like	Very Much Opposed	No Response
Girls with "nursing characteristics" who choose nursing.....	250	79	14	2	4	0	1
Girls with "nursing characteristics" who do NOT choose nursing.	225	56	26	7	9	0	1
Girls who lack "nursing characteristics" who choose nursing.....	250	74	23	1	0	0	0

PATTERNS FOR THE CHOICE OF NURSING AS A CAREER

A. PATTERNS OF OCCUPATIONAL SELECTION

In the previous chapters, we have discussed occupational choice in general and the choice of nursing as a career in particular, as if this choice took place at a given instant, rather than over a fairly long period of time. We have outlined the factors that are important in affecting girls' decisions with respect to the occupation they intend to follow and the relationships between them, but we have largely ignored the question of the temporal sequence in which the effects of these factors occur, and in this chapter therefore, we will try to fill this gap.

The kinds of questions we will try to answer are:

- 1) At what age do girls choose nursing as a career as compared to those choosing other occupations?
- 2) Are those who choose nursing at an early age different from those who choose this occupation later and, if so, in what respects are they different?
- 3) Are different factors important in affecting a girl's choice of nursing at different ages?
- 4) Do a higher proportion of those who choose nursing at a young age tend to change their choice than those who make the choice at a later age?
- 5) To what extent do girls who choose nursing also consider alternative occupations?
- 6) Do girls with different backgrounds tend to have different choice patterns or processes?

In the preceding chapters, we were primarily concerned with the decisions, attitudes and perceptions of the girls in our sample at a particular point in time, namely, in their junior matriculation year. In the present chapter however, the kinds of questions we will be discussing mainly involve data concerning each girl's occupational choice history, and the gathering of this kind of information often places heavy demands on her memory. There are fairly serious limits on the extent to which a questionnaire can secure this type of information, and it was

therefore decided to supplement the data gathered by our questionnaire with interviews with about 250 respondents, who constitute a randomly drawn sub-sample of the group of girls who answered the questionnaire. Some of the data gathered by the use of the questionnaire duplicate some of the information obtained from the interviews and, in these cases, we have compared the results from the two sources and indicated any significant differences. Nevertheless, for the most part, the material in this chapter is based on data gathered in the interviews which were punched on cards and tabulated. However, although we have supporting evidence in tabular form for all of the conclusions presented in the chapter, with one or two exceptions, these tables have been omitted primarily because the relatively small number of girls interviewed increases the range of possible error to which the figures are subject; therefore, to include tables showing particular percentages would not be very helpful to our readers since it would not be legitimate to place too much emphasis on the precise figures that appear in them. For this reason, in this chapter we have tended to use comparative terms such as "more" and "less" in presenting our conclusions, rather than precise percentage points. Our reluctance to use such unwarranted precision in stating our findings should not however be interpreted as reason for being similarly uncertain about the validity of our conclusions since, in presenting them, we have already taken account of the possibility of error mentioned previously.

The general form of analysis in this chapter involved dividing our sample into different groups in terms of whether they *considered* an occupation early or late, whether they *chose* an occupation early or late, whether they considered more than one occupation or not and, if they did, whether they retained an early choice or made a new one. Taken separately and together in different combinations, these represent a variety of temporal patterns of occupational choice which differ with respect to:

- 1) the age at which occupations are "considered";
- 2) the age at which occupations are "chosen";
- 3) the extent to which occupational choice involves the consideration of alternative occupations, and the eventual selection of one and the rejection of others.

Having divided our sample according to each aspect of these various temporal patterns of occupational choice, we then attempted to ascertain whether there was any relationship between one element of the pattern and another, e.g., whether those who choose an occupation at a young age tend not to consider alternatives and, finally, we looked to see whether girls with different patterns of occupational choice had different social backgrounds or were subject to different kinds of influence.

Although we are interested primarily in the choice of nursing, as in previous chapters, we will be comparing girls who choose nursing with those who choose other occupations, since in order to explain why girls want to become nurses, we must ascertain what distinguishes them from girls who do not.

At the end of this chapter, we will have a few words to say about the differences and similarities between those girls who go to hospital schools of nursing and those who go to university schools of nursing.

1. Frequency of Choice of Nursing and the Age at Which the Choice is Made

Approximately 21 per cent of the girls in our sample were considering some occupation or other before they had completed Grade VI, and over one-half of these girls later changed their minds about the occupation they had chosen. How many girls considered nursing as an occupation and at what age did they do this? About one girl out of every two considers nursing at some time in her life; but only 21 per cent of our sample finally chose nursing as a career. In other words, some 31 per cent of those who consider nursing, finally reject it for one reason or another, which constitutes a larger number than eventually accept nursing as a career.

Comparing the temporal pattern of choice of those choosing nursing with those planning to enter high status occupations, we find that the latter very rarely choose these occupations before the age of thirteen; in fact, even at the age of seventeen or eighteen, almost two-thirds of the girls choosing high status occupations have not made a definite choice of any one job, but rather are considering several. In addition, whereas a high proportion of girls choosing nursing do not consider other alternatives, only a very small proportion of girls choosing high status occupations fall into this category.

Comparing the choice pattern of girls choosing nursing with those planning to enter low status and other medium status occupations other than teaching, we find that, unlike those planning to enter nursing, only a very small number of girls choosing low and medium status occupations do so at an early age, and a somewhat higher proportion of these girls are still undecided about their choice. The most outstanding difference between this group and the one choosing nursing is that almost one-half of the girls planning to enter low and medium status jobs do so after having considered and decided against some other occupation.

The occupation with the temporal choice pattern most similar to nursing is that of teaching. A relatively high proportion of girls who are planning to enter each of these occupations makes this decision at an early age, although among those choosing nursing, the proportion is even higher than for those choosing teaching; about the same proportion of both groups first consider these occupations at a later age; and about the same proportion choose these occupations after having considered and decided against other jobs. The only difference of any significance between the two groups of girls is that those who choose teaching are more likely also to be considering other occupations.

In general then, girls who choose nursing as a career have quite a different pattern of decision-making from those choosing other occupations in three important respects: (1) the choice is made much more frequently when the girl is very young; (2) a much higher proportion of these girls will not have considered any alternative occupations and (3) they are much more definite about their choice and

therefore have not made a selection of alternative occupations to fall back on, if they are thwarted in their desire to become nurses.

About 60 per cent of those who consider nursing, at some point in their lives do so by the age of thirteen; this is a higher proportion considering at an early age than is the case for those considering any other occupations including teaching which also has a higher proportion of girls who choose this occupation when they are young. This means that about one girl in three considers nursing as an occupation before the age of thirteen. Of those considering nursing before they reach Grade VI, about one-third eventually choose nursing as a career, while approximately one-half of those who do not consider nursing as a possible career until later, become nurses. The chances that a girl will finally decide to become a nurse are somewhat better therefore if she does not begin to consider this as a possibility until she is in her teens. Out of every ten girls considering nursing at an early age, one will never consider any alternative occupations and, of the remaining nine who do, three will stay with the choice of nursing and six will choose a different occupation; while only slightly over one-half of those who consider nursing at a later age who also thought of going into other occupations, eventually rejects nursing in favour of a different job. It would appear, therefore, that the fact that a higher proportion of girls who consider nursing at a later age eventually choose nursing, is due to the fact that a greater amount of thought is given to the choice. Table 6:1 summarizes the above findings dealing with the frequency of various patterns of occupational choice with respect to nursing, based on any random sample of 100 girls.

It is to be noted that those who choose nursing as a career are more or less equally divided between those who considered nursing before Grade VI and those who did not consider it until later, and about one out of five has never considered the possibility of entering an alternative occupation.

Of all the occupations chosen by the girls we interviewed, nursing is the most likely to be considered early, and the least likely to attract girls from other occupational choices; less than one in five who choose nursing have switched from a previous choice.

Teaching is similar to nursing in that a high proportion of girls choosing this occupation first considered it before Grade VI, but about one-third of those planning to become teachers have done so after discarding a previous choice.

Those choosing high status occupations on the other hand, are much less likely to first consider this kind of job at an early age and much more likely to do so when they are older. About one in three of this group has changed her mind concerning her occupational choice.

About the same number of girls choosing medium status occupations make their choice early as those making it late, but a much higher proportion of these girls have discarded previous occupational choices.

Girls entering low status occupations are more likely than others to do so after having considered alternatives and therefore this category includes the lowest proportion of girls who considered this kind of job before Grade VI.

TABLE 6:1

Number Considering Nursing	Number Who Considered Alternatives		Number Choosing Nursing		Per Cent of Those Choosing Nursing		Number Choosing Other Occupations	
	Yes	No	Yes	No	Yes	No	Yes	No
30 considered nursing early	27	3	8	3	38	14	19	0
	30		11		52		19	
22 considered nursing late	21	1	9	1	43	5	12	0
	22		10		48		12	
52 considered nurs- ing at some time ..	48	4	21		100		31	
48 never considered nursing			—				48	
Total 100			21				79	

The pattern for nurses, then, is most similar to that for girls choosing teaching, except that the latter tends to attract a larger number of girls who have considered other occupations and slightly fewer girls who make the choice before they reach the age of thirteen. The fact that both of these occupations are considered by a large number of girls at an early age is probably due to the fact that they are particularly visible occupations. They are the most common occupations for women, and through actual contact with those in the occupations, girls probably become aware of them at a much earlier age than many other occupations; in addition, as compared with those occupations which are equally visible, they also have somewhat more prestige and status.

However, in case these similarities lead the reader to conclude that perhaps those who choose teaching could be easily persuaded to choose nursing instead, we would point out that although two out of three girls who choose teaching before the age of thirteen, change their mind and choose other jobs, only one-quarter of these girls eventually choose nursing, which means that only about 16 per cent of those who choose teaching at an early age eventually change to nursing. The attitudes of those choosing nursing before Grade VI towards teaching is much the same. Again, although two out of three who consider entering the nursing profession before the age of thirteen eventually give up that idea, only about one in five of these embraces teaching as a career, which amounts to 13 per cent of those considering nursing before Grade VI. In other words, at least for those who consider these two occupations before they reach the age of thirteen, the two occupations are not interchangeable except for a small minority. In fact, girls who decide to become nurses when they are young and later change their mind are more likely to substitute high status jobs, while girls choosing teaching early are much more likely to choose medium and low status jobs than they are to choose the others' occupation.

2. Social Background Characteristics and Patterns of Occupational Choice

The question that might be asked at this point is: "In what respects are girls who consider nursing at a young age different from those who wait until they are older before considering this occupation?" In an attempt to answer this question, we first looked at the social background characteristics of the girls with different patterns of occupational choice.

a. Social Class

In general, we found that girls coming from families of professional men and white collar workers tend to consider nursing earlier than those from blue collar and farm families, but the difference is not particularly great. However, there is a striking difference in the proportion of these two groups who change their minds about their choice of nursing. Less than one-half of the girls from lower social classes maintained their choice of nursing, while as many as three out of four upper class girls continue with this choice. On the basis of our previous analysis, this may be explained by the fact that lower class girls tend to have lower high school grades than upper class girls and therefore when they become older they are more likely to see the academic entrance requirements for the nursing profession as a barrier.

b. Urban-rural Residence

We also found that girls from rural areas are somewhat more likely to consider nursing at a later age than girls from urban areas. At first we suspected that this was because of the relatively greater role that occupations play in the life of city dwellers, which would mean that rural girls would be less likely to think about choosing any occupation at an early age. However, when we checked this by comparing the proportions of urban and rural girls making early choices of other occupations, we found no consistent differences between the two groups. The somewhat later choice by rural girls, therefore, appears to be restricted to nursing and the factor which suggests itself to explain this finding is that, for a girl living in an extremely rural area, becoming a nurse is probably seen as involving leaving home, and, at an early age, this may be seen as a less attractive feature of nursing than when the girl is older.

c. Geographic Region

When we compare girls from each of the provinces in terms of their occupational choice pattern, we find the following results:

i. a higher proportion of girls in Quebec and Ontario tend to consider nursing at a late age rather than an early one, but those in the Atlantic Provinces, the Prairies and British Columbia are more likely to consider this occupation early. In a sense this is surprising, in view of the fact that we found previously that girls from rural areas are more frequently late choosers, which would lead one to expect the opposite findings to those obtained with respect to these two groups of provinces.

ii. in all provinces the proportion of girls who eventually choose nursing is higher for late choosers than for early ones, but the overall ratio of girls who

switch from nursing to some other occupation is just one out of three for all provinces except Ontario, where it is almost one out of two.

iii. the Atlantic Provinces are different from the other provinces in that a lower proportion of girls consider nursing early and choose it without considering alternatives, and a higher proportion never consider nursing at all, than is the case for the other provinces.

iv. the most outstanding difference in all of the comparisons between the provinces is that almost one-half of those who choose nursing in Quebec do so after they reach the age of thirteen and after having discarded a previous occupational choice. The province which most closely resembles Quebec in this respect is Ontario, where only one out of three girls falls into this category, while for the rest of the provinces the proportion is extremely small.

3. Social Background Characteristics and the Consideration of Alternatives

Finally,¹ the extent to which girls consider alternatives to nursing does not appear to be different for girls from different social backgrounds. This is perhaps surprising, since it would appear reasonable to suppose that upper class girls have a greater range of choices of occupation open to them and would therefore tend to consider a greater number of alternatives. However, perhaps it is merely that girls from different social classes have a different set of alternatives available to them, rather than a varying number of alternatives.

While the number of girls interviewed is too small to permit making very fine breakdowns, the proportion of the girls considering teaching, like nursing, is fairly large and we can therefore compare these two groups. The most striking difference between them is that, whereas there are only slightly more early choosers in the upper classes, and only slightly more late choosers in the lower classes in the case of nursing, the picture for teaching is clearly different; the early choosers of teaching as a career are much more frequently in the lower social classes, while late choosers tend to come somewhat more frequently from the upper social classes. To some extent, the situation with respect to teaching may be due to the considerable variation in the academic entrance requirements for this profession to which we have previously referred, which may have an effect on the image of the profession and thus on its choice at different ages.

4. Influence and Support and Patterns of Occupational Choice

a. Play Activities and Parental Support

In Chapter V we found that the choice of nursing as a career was affected by the amount and kind of support and influence to which girls were subject. It was therefore thought probable that differences in patterns of occupational choice would, to some extent, be due to differences in support and influence. In general, our data confirm that girls who play at being a nurse when they are young are

¹We were unable to make inferences concerning the relationship between high school grades and patterns of occupational choice because we lacked data with respect to the latter for a substantial proportion of our sample.

more likely to consider nursing as a possible occupation before they reach the age of 13 than girls who do not engage in such play activity, and that girls whose parents react favourably when the girls play the role of a nurse are more likely both to eventually choose nursing and also to choose it earlier than in the case of girls whose parents do not provide such support. For example, of the girls who played at being a nurse when they were young and received parental support, 90 per cent of them also considered entering nursing at an early age and almost one-half of them were still planning to be nurses at the time of the interviews. On the other hand, of the girls who played nurse but did *not* receive support from their parents, only one-half considered nursing as a career and substantially less than one in five still maintained this choice when interviewed.

Much the same effects occur in the case of those choosing teaching, although in general, the amount of parental support given to play activities in which girls play the role of teacher is somewhat less than in the case of the role of the nurse.

b. The Presence of Occupational Models

Another possible influence on patterns of occupational choice is the presence of models that have already been shown to be important in the choice of nursing in Chapter IV. In addition, we now find that the presence of relatives who are nurses does result in a much higher proportion of girls considering nursing as a career; girls with such models are almost twice as likely to consider nursing as those without them. The presence of occupational models also appears to have the effect of reducing the number of girls who choose early and later change their mind.

A similar picture is obtained when we examine those choosing teaching. As with nursing, girls who consider teaching early and eventually choose this occupation, are somewhat more likely than girls who consider late, to report the presence of teacher models among their relatives.

c. Principal Events Leading to Consideration of Nursing

Our respondents were asked to indicate what it was that led them to think about nursing as a career. As one might expect, girls who had first considered nursing before the age of thirteen frequently had trouble remembering what had led them to think about becoming a nurse. However, even among those who first considered nursing more recently, a very high proportion also had considerable difficulty in answering this question, while the girls who were most likely to be able to recall what led them to first consider nursing were those who considered it late and eventually decided against it. It is interesting to note, in passing, that nurses seem peculiar in this respect; in the case of those planning to become teachers, a much lower proportion said they did not know why they first considered this occupation, even though a large proportion of them first thought of teaching before they were thirteen. For this reason, the data on which this section is based are rather meager (only just over one-half of our sample answered this question), and our comments should therefore be noted with this fact in mind.

The following are the kinds of events that were most frequently given as leading the girls in our sample to consider nursing:

- a. For the group choosing nursing as a whole: “family or relatives directly or indirectly suggested it”
- b. For those considering nursing before the age of thirteen: “family or relatives directly or indirectly suggested it”
- c. For those considering nursing after reaching the age of thirteen: “people and events outside of the family, such as friends, teachers and high school vocational counsellors”

This last result is consistent with another finding that, for those girls who consider nursing after the age of thirteen, support from persons outside the family is more important than for girls who first consider this occupation before the age of thirteen.

We also found about one in five girls who choose nursing after having rejected an earlier occupational choice, do so because they encounter barriers to their entry to the occupation originally chosen. About the same proportion of those girls who choose nursing late, without having made a choice of an occupation before, say that their choice of nursing was due to their feeling that they ought to make a choice of an occupation at that time.

Finally, girls who consider nursing late and eventually decide against it, seem to have been influenced much more frequently in their original choice of nursing by their teachers and high school counsellors and school guidance programmes. Of those girls who reported that their first consideration of nursing was stimulated by experiences such as these, two-thirds eventually decided not to enter nursing. In this respect it should be mentioned that very frequently in our interviews our respondents would indicate that the advice received from high school counsellors concerning the kind of job that would be most appropriate for them was discounted, and that the most useful function that they saw counsellors as serving was the provision of information about jobs.

d. Parental Support

If a girl receives strong support from either one or both of her parents, the chances that she will consider nursing before the age of thirteen are about twice as great as they would be if either of her parents showed negative reactions to her choice. However, it is to be noted that our data clearly indicate that the influence of such parental discouragement diminishes markedly as the girl gets older. The proportion of girls considering nursing after the age of thirteen is *not* lower among those girls whose parents showed negative reactions to their choice than it is for girls whose parents supported their decision; in fact, the proportion increases noticeably from 45 per cent to 76 per cent! One fairly obvious explanation for this finding, of course, is that during adolescence the importance of parental attitudes and reactions to occupational choice (if not to many other things as well) is probably relatively less important than at earlier ages; it is in adolescence,

too, that peer group attitudes play a much more important part in influencing other girls in such matters as occupational choice.

e. Sources of Information

In general, it was found that girls who both considered and chose nursing at an early age tended to have information provided for them by others more often than they solicited it for themselves and also that they had access to less information than other girls. This would suggest that, when a girl makes an early commitment to nursing, this tends to insulate her from further knowledge about that profession. The girls who are most likely to solicit information about nursing, on the other hand, are those who both considered and chose it late. Girls who considered nursing early and then considered alternatives before finally choosing nursing, also tend to rely most heavily upon information which they secure for themselves.

We now turn to differences in sources of information for girls with different patterns of choice. Generally speaking, various sources of information used by the girls in the groups we are considering appear to be very similar. There are, however, exceptions: first, girls who choose nursing late tend to obtain their information from a greater number of sources than girls who choose this occupation early, which seems to imply that the older the girl is when the choice of nursing is made, the more information she is likely to have about nursing. Next, girls who consider nursing when they are older, more frequently report securing this information from personal friends than girls who first considered nursing when they were young. It will be remembered that we suggested earlier in this chapter that peer group friends were an especially important source of influence in the case of girls who chose nursing at a later age, and their importance as a source of information tends to support this conclusion. Thirdly, experiences from contact with nursing were most frequently reported by girls who considered nursing early, but later discarded this choice. These girls sometimes reported such things as seeing an automobile accident and being upset by the sight of blood and the pain experienced by the victim. Other girls worked as volunteers in hospitals and found it disillusioning.

5. Attractions and Negative Features of Nursing and Patterns of Choice

Our respondents were asked to give the principal reasons for finding nursing attractive. Analysis of these data produced the following results:

(a) girls who choose nursing at an early age are less likely to be able to provide reasons why they find nursing attractive,

(b) girls whose choice of nursing comes at a later age, on the other hand, give a wider range of reasons for liking the profession than those whose choice was early,

(c) those with an early commitment to nursing, who give reasons for it, more frequently cite "society-benefiting" values than late choosers, but more often see extrinsic values in nursing than those who choose nursing late.

Data were also obtained from those of our respondents who eventually rejected nursing as a career, concerning the kinds of features of the nursing profession that they did not like. The difference between those girls who considered nursing early and those who initially considered it late is that fewer of the girls who first considered nursing before they were thirteen were able to give reasons for discarding their choice of nursing than was the case for girls who considered it at a later age. This is consistent with the previous findings. For the girls in the first group who did supply reasons, the principal ones given were that the work involved in nursing was not seen as sufficiently interesting to them and that the period of training in nursing school was too long and difficult. Those who first considered nursing at a later age and eventually discarded this choice, however, were more likely to say that the reasons for the decision were (1) that they themselves were not adequate for the job, either in terms of their academic ability or in terms of their personality and (2) that nursing would not enable them to achieve certain goals that they seek.

6. Attitudes Towards Nursing and Patterns of Choice

Included in the sample of girls who were interviewed were some in the first year of schools of nursing, and these respondents were asked about their present attitude towards nursing. While the sample is very small, these data might offer tentative suggestions concerning the extent to which girls with different occupational choice patterns are likely to make good nurses. It is realized however that, since the girls in our sample had only been in nursing school for less than a year, their present attitude toward nursing can hardly be taken as a measure of their eventual success as nurses; the data are presented primarily for the readers' interest.

In general, the numbers of girls who made specific complaints about such things as course work, the discipline of the nursing school, that the work was too hard and so on, was much the same for all girls, irrespective of the age at which they considered or chose nursing as a career, although it is true that a somewhat higher proportion of girls who chose nursing early complained about course work and discipline than is the case for the late choosers. However, the interesting picture developed with respect to judgements of overall satisfaction with, and happiness in, their present situation. The girls who made an early commitment to nursing were considerably less likely to be "completely satisfied with nursing school and nursing" than girls choosing nursing at a later age, but at the same time, almost none of these girls was prepared to say that she "did not like nursing school or was unhappy about being a nurse". The girls who decide to become nurses at a later age, on the other hand, were more willing to admit to the second statement and a much larger number also indicated that they were completely satisfied. The interesting feature of these results concerns the early choosers, who are clearly not satisfied with their experience in nursing school and, in fact, tend to make more complaints about certain characteristics of this experience, and yet are unwilling to say that they do not like nursing or that they are unhappy about becoming a nurse.

B. COMPARISON OF GIRLS IN HOSPITAL AND UNIVERSITY SCHOOLS OF NURSING

So far in this study we have been discussing the social background characteristics of girls planning to enter the nursing profession and the factors that affect this decision. However, there are at least two important routes into that profession, namely, through a hospital school of nursing and through a university school of nursing, and it should be pointed out that when presenting the data in the previous chapters, a distinction was not made between the response of girls who plan to go to hospital schools of nursing and those who plan to go to university schools of nursing. Further, the data in Chapter II showed quite clearly that girls who intend to go to university are much more likely to choose high status occupations, and are also very different in many other respects from other girls. Since it was anticipated that these two groups of girls would be different from one another, samples of these two groups were chosen to complete our questionnaire and we will now present these data and point out the differences and similarities between them.

1. Social Background Characteristics

a. Social Class

Table 6:2 shows the social class distribution both for girls in hospital and university schools of nursing, from which it will be seen that girls in the latter type of nursing school much more frequently come from the higher social classes than do the girls in hospital schools of nursing.

TABLE 6:2
SOCIAL CLASS BACKGROUND OF GIRLS IN
UNIVERSITY AND HOSPITAL SCHOOLS OF NURSING

Social Class	N	Per Cent of Those in Hospital Schools	Per Cent of Those in University Schools
Professional.....	129	6	28
White Collar.....	495	37	49
Blue Collar and Farm.....	572	52	21
No response.....	53	5	2
Total per cent.....	1,249	100	100

$\chi^2 = 180.531$; d.f. = 24; $P < .001$

b. Urban-rural Residence

We have already shown that girls in university schools of nursing come much more frequently from the higher social classes and, since we found in Chapter II that girls in these social classes come more frequently from urban areas, we would expect the girls in university schools of nursing would also come more often from urban areas. As Table 6:3 shows, this is in fact the case.

TABLE 6:3

RESIDENTIAL AREA OF GIRLS IN UNIVERSITY AND
HOSPITAL SCHOOLS OF NURSING

Residential Area	N	Per Cent of Those in Hospital Schools	Per Cent of Those in University Schools
Cities of 200,000 or more.....	290	16	53
Towns between 4,000 and 200,000 .	505	43	31
Towns 4,000 or less.....	230	20	11
Farms	203	19	5
No response	21	2	0
Total per cent	1,249	100	100

$X^2 = 165.233$; d f. = 15; $P < .001$

c. School Grades

Unfortunately, it was not possible to secure high school grades for these students as they had already left high school and were in schools of nursing at the time they completed the questionnaire. However, since girls who go to university probably have somewhat higher school grades than those who do not, it seems fairly safe to assume that girls in university schools of nursing are on the whole higher in scholastic performance than girls who go to hospital schools of nursing.

d. Religion

Table 6:4 shows an appreciably lower proportion of Catholics among the girls in university schools of nursing. This is no doubt due to the fact that, generally speaking, a lower proportion of Catholics attend university as compared to Protestants.

TABLE 6:4

RELIGIOUS AFFILIATION OF GIRLS IN UNIVERSITY AND
HOSPITAL SCHOOLS OF NURSING

Religious Affiliation	N	Per Cent of Those in Hospital Schools	Per Cent of Those in University Schools
Catholic (regular attenders).....	501	44	24
Protestants (regular attenders) ..	434	33	43
Protestants (infrequent attenders)	260	19	29
Others	39	3	3
No response	15	1	1
Total per cent	1,249	100	100

$X^2 = 92.334$; d.f. = 15; $P < .001$

In summary then, the social background characteristics of girls in university schools of nursing are quite different from those of girls in hospital schools of nursing. Students in university schools have the same kinds of background characteristics as other girls attending university who are planning to enter high status occupations; they come much more frequently from the higher social classes, from urban rather than rural areas, and have higher scholastic achievement; in addition, they tend to include a much lower proportion of Catholics among them.

2. Values

Girls in university schools of nursing are therefore more like girls choosing high status occupations than girls choosing medium status jobs, and yet they are planning to enter an occupation which has medium status. Since we found that girls choosing high status occupations were different from other girls with respect to values, job perceptions and self-image, we shall now try to answer the question: "Are girls who go into the nursing profession through a university school of nursing more like other girls who go to university and choose high status jobs, or more like girls who enter nursing through other channels?"

a. Society-Family-Self Values

It will be remembered that girls choosing occupations of different statuses did not significantly differ with respect to these values, but we did find that girls choosing social service occupations held a very different pattern of these values from those choosing other jobs. Specifically, girls who found social service occupations attractive gave greater importance to society-benefiting values and less importance to self-benefiting values than other girls. From Table 6:5, as we would expect, we find that there is no significant difference between the value configurations of girls attending university and hospital schools of nursing; both groups rate society-benefiting values very high and self-benefiting values low.

TABLE 6:5
SOCIETY-FAMILY-SELF VALUE PATTERNS OF GIRLS IN UNIVERSITY
AND HOSPITAL SCHOOLS OF NURSING

School of Nursing Attended	N	Per Cent in Each Type of School Holding Value Pattern:				
		Society>Family Society>Self	Family>Society Family>Self	Self>Family Self>Society	No Response	Per Cent Total
Hospital Schools of Nursing	237	62	24	7	7	100
University Schools of Nursing	1,012	67	20	7	6	100
Total per cent	1,249	63	24	7	7	100

$\chi^2 = 12.656$; d.f. = 15; $.50 < P < .70$

b. *Intrinsic-Extrinsic Values*

Earlier, in Chapter III, we found that girls choosing high status occupations tended to prefer intrinsic values more and extrinsic values less than girls choosing low status occupations. Specifically, the modal categories for girls choosing occupations of different statuses are:

- High Status Occupations: Creativity and Self-Development
- Medium Status Occupations: Self-Development and Security
- Low Status Occupations: Security and Self-Pleasure

From Table 6:6 it is clear that girls in university schools of nursing have value patterns more like those of girls choosing high status occupations than those of girls choosing medium status occupations, including nursing. While both groups tend to place the least importance on self-benefiting values, girls in hospital schools of nursing place a greater importance on values at the mid-point on the the intrinsic-extrinsic scale, whereas girls in university schools of nursing place more importance on intrinsic values.

TABLE 6:6

INTRINSIC-EXTRINSIC VALUE PATTERNS OF GIRLS IN
UNIVERSITY AND HOSPITAL SCHOOLS OF NURSING

School of Nursing Attended	N	Per Cent in Each Type of School Holding Value Pattern:		
		Intrinsic ←————→ Extrinsic		
		Creativity and Self-Development	Self-Development and Security	Security and Self-Pleasure
Hospital Schools of Nur- sing.....	237	21	50	20
University Schools of Nursing.....	1,012	34	31	19
Total per cent	1,249	24	46	20

$X^2 = 53.026; d.f. = 9; P < .001$

3. **Perceptions of Nursing**

a. *Society-Family-Self Values*

Just as there were no differences in the importance placed on society, family and self-benefiting values by girls in university schools of nursing as compared to those in hospital schools, so we find that there is no difference between these two groups in the extent to which they perceive nursing as mediating these values.

b. *Intrinsic-Extrinsic Values*

The differences between the perceptions of the nursing profession of girls in university schools of nursing and those in hospital schools are not as

great as the differences in the values they themselves hold. University nursing students prefer intrinsic values more than hospital nursing students and a higher proportion of the former perceive these in the nursing profession as compared to the latter.

TABLE 6:7

INTRINSIC-EXTRINSIC VALUE PATTERNS PERCEIVED IN NURSING BY GIRLS IN UNIVERSITY AND HOSPITAL SCHOOLS OF NURSING

School of Nursing Attended	N	Per Cent of Each Type of School Perceiving Value Pattern in Nursing:		
		Intrinsic ←————→ Extrinsic		
		Creativity and Self-Development	Self-Development and Security	Security and Self-Pleasure
Hospital Schools of Nursing.....	237	16	58	22
University Schools of Nursing.....	1,012	21	44	26
Total per cent	1,249	17	55	22

$x^2 = 31.214; d.f. = 9; P < .001$

However, it is important to note that while some 24 per cent of both groups regard intrinsic values as important, only 17 per cent perceive these as being satisfied in nursing; further, whereas only 46 per cent hold values at the mid-point of the intrinsic-extrinsic scale, 55 per cent see the nursing profession as characterized by these particular values. Both groups therefore see the nursing profession as offering somewhat different benefits from the ones they want and this is more true for girls in university schools of nursing than it is for girls in hospital schools. Nursing students at university are more likely to desire intrinsic benefits as other girls at university do, but they see the occupation they have chosen, namely nursing, as one which does not satisfy these desires, but instead they perceive nursing as mediating more extrinsic values. This would suggest that girls of this type who enter the nursing profession through university schools are more likely to be dissatisfied with their occupational choice, if their perceptions of the benefits offered by that occupation are confirmed on entry into it.

c. *Specific Characteristics of Nursing*

As shown in Table 6:8, the principal differences in the perceptions of the nursing profession between girls in university and hospital schools of nursing are as follows:

- i. fewer girls in university nursing schools see the training period for this profession as an important negative feature. This may be due either to the fact that their academic ability and their social class position are usually higher than those of girls in hospital schools, or to the fact that they have experienced a different kind of training from that given in hospital schools of nursing.

TABLE 6:8
CHARACTERISTICS OF NURSING PERCEIVED BY GIRLS IN
UNIVERSITY AND HOSPITAL SCHOOLS OF NURSING

Characteristics of Nursing	Per Cent of Girls in Each Type of School Perceiving Characteristics in Nursing:	
	Hospital Schools of Nursing	University Schools of Nursing
Opportunity to go to nursing school and learn interesting and useful things.....	71	79
Provides an adequate income	48	60
Involves contact with interesting people...	77	91
Bring me into contact with marriageable men	16	18
Tremendous satisfaction in helping people.	96	95
Regarded more highly than other occupations for women	64	65
Find other nurses congenial to me.....	36	45
Give me sense of security by being with others who would help me if I needed it.	47	40
Require me to leave home for long period..	23	23
Enable me to move to large city and travel.	34	38
Requires long training period	12	3
Doesn't pay well enough.....	19	21
Involves working in atmosphere of sickness and death	1	2
Involves meeting lots of strangers.....	1	0
Probably interfere with my marriage plans.	3	2
Involves working in situations with un- pleasant odours and the sight of blood.	52	61
Involves much hard physical work	56	70
Is one people don't regard very highly.....	3	10
Is one in which I wouldn't particularly like other nurses with whom I work	1	0
Involves too much discipline and lack of freedom	4	3
Requires too much dedication and self- sacrifice	3	4
Involves irregular hours and shift work....	11	11

ii. it is somewhat surprising to see that girls in university schools of nursing are somewhat more likely to regard the income nurses receive as adequate, since one would anticipate that they would expect a higher income than girls in hospital schools because they generally come from a higher social class.

iii. as one would expect, a higher proportion of girls in university schools of nursing are dissatisfied with the prestige of this occupation.

iv. finally, it is surprising to find that girls in university schools do not have more negative attitudes towards the discipline involved in nursing, especially since we found that other girls planning to enter university who choose high status occupations are more likely than middle class girls to see this as an unattractive characteristic of nursing. However, it may be that, because the type of training received is different from that received by girls in hospital schools, they have different perceptions of the amount of discipline involved in nursing; on the other hand, they may have different attitudes towards discipline and the lack of freedom it entails as compared with other upper class girls.

4. Self-Image

In Chapter III we found that girls choosing nursing saw themselves as being more able to control their emotions than girls choosing other occupations. Some 48 per cent of this group evaluated themselves more highly than others in this regard. Girls in schools of nursing, both university and hospital, have a similar image of themselves; some 43 per cent of girls in university schools and 45 per cent of girls in hospital schools see themselves as possessing this characteristic more than other girls.

C. SUMMARY OF THIS CHAPTER

In this chapter, we have tried to set forth different temporal patterns involved in the choice of nursing, to compare the frequency with which they occur in nursing in relation to other types of occupations, and to describe the kinds of girls who conform to each of these patterns and the factors that appear to account for them. In summarizing our findings with respect to these matters, we have taken the major breakdown of temporal patterns of occupational choice in terms of the age at which nursing is first considered, and then we have provided for each of the subtypes of patterns within the two major groups, information concerning the proportion of girls in each pattern, and a kind of thumbnail sketch of their social background characteristics and the factors that appear to account for girls falling into each pattern. We have set these down side by side, in order that the reader can more easily compare the appropriate patterns in each of the two major groups.

It will be recalled that about 21 per cent of all girls consider some occupation before they have completed Grade VI, and of these, over 50 per cent later change their minds about their occupational choice.

About 50 per cent of all girls consider nursing as a career at some time or other but, although 21 per cent eventually choose nursing, 31 per cent decide against it and choose another occupation.

EARLY CHOOSERS

(those who consider nursing as a career
before completing Grade VI)

1. How many are there and what occupation
do they finally choose?

About 60 per cent of all girls who consider nursing, do so before the age of thirteen (and this proportion is higher than for any other occupation). Out of every ten girls who consider nursing early, six will eventually choose a different job and four will eventually choose nursing as a career. Of these latter four, one will never seriously consider the possibility of entering any alternative occupation while the other three will.

2. What kinds of girls are likely to con-
sider nursing at an early age?

Girls who consider nursing before the age of thirteen are more likely to be upper class girls and girls who live in urban areas. We also find more of them in the Atlantic Provinces, the Prairies and British Columbia than we do in other parts of Canada.

3. What factors appear to lead to an early
consideration and eventual choice of
nursing as a career?

Of those who consider nursing before the age of thirteen, about one-third finally choose this occupation.

Typically, girls who consider nursing at an early age are much more likely to have played at being a nurse when they were young and to have received parental encouragement for this kind of play activity. In general, their initial interest in nursing is more likely to have been stimulated by members of the family or relatives directly or indirectly suggesting it; they are more likely to have had relatives who were nurses and who thus presented them with the occupational model of the nurse; and to have received strong parental encouragement for their choice of nursing. On the other hand, they tend to have less information about nursing, and what they have is likely to have been

LATE CHOOSERS

(those who do not consider nursing as a
career until after Grade VI)

1. How many are there and what occupation
do they finally choose?

About 40 per cent of all girls who consider nursing at some time or another do so after they reach the age of thirteen. Of those who consider nursing late, about one-half will eventually decide to become nurses and the other half will switch to different occupations.

2. What kinds of girls are likely to con-
sider nursing at a later age?

Girls who consider nursing for the first time after they reach the age of thirteen are more likely to be girls from blue collar and farm families and girls who live in very rural areas. We also find more of them in Ontario and Quebec.

3. What factors appear to account for late
consideration and eventual choice of
nursing as a career?

Of those who consider nursing after the age of thirteen, about one-half eventually choose this occupation.

As compared to girls who choose nursing at an early age, these girls are less likely to have engaged in play activity in which they assumed the role of a nurse, when they were young; and also less likely when they did, to have received parental encouragement. These girls are also less likely to have relatives who provided this occupational model. Parental support and influence is of little importance either in stimulating an initial interest in nursing or in the choice of this profession for girls who make this decision later. However, in this regard, people and events outside the family, and particularly peers are especially important in creating an initial interest in this occupation, in

provided for them by others, rather than to have been solicited by themselves. Those who both consider and choose nursing before the age of thirteen, in particular, appear to be relatively insulated from information about the profession following their choice.

Those within this group who not only considered nursing at an early age but who also developed an early commitment to it as a future career, are particularly prone to know less about nursing, to have taken less trouble to find out about the nursing profession, and to be unable to explain why they considered it and what they like and dislike about it.

Generally speaking then, the choice of nursing at an early age is probably due to strong support and influence by the girl's family and relatives. Those girls whose initial interest in nursing occurred at an early age and who eventually decide to become nurses as the result of such family influences, tend also to rely more heavily upon their family for information about their future occupation and thus to know less about the nursing profession and the reasons for their choice of it.

4. What characteristics of nursing do these girls find attractive?

As a group, they are less likely to know which characteristics of the nursing profession attract them and those that do, tend to find them within a fairly narrow range. In particular, the kinds of things they like about nursing are the fact that they see this occupation as being especially important to society and, on the other hand, that it is instrumental in enabling them to achieve certain goals that they seek.

5. What kinds of girls consider nursing early, later consider other occupations, but eventually choose nursing as a career?

Of the girls who consider nursing early, about 38 per cent also consider entering other occupations, but finally choose nursing.

However, none of the social background characteristics or support and influence

providing information about it and in the eventual choice of nursing as a career. About one in five of the girls who choose nursing after the age of thirteen do so because they feel a need to have made an occupational choice at this relatively late age. These girls are also much more likely to actively solicit information about the nursing profession and to have obtained more information from a greater variety of sources than those who choose early. Further, they are more able to explain what led them to consider nursing.

Generally speaking, the choice of nursing at a later age is less likely to be the result of parental influence experienced at an early age to consider and choose nursing as a career, but during adolescence, when presumably parental influence is less effective, these girls are more likely to be influenced by others outside the family, particularly their peers. When the consideration of nursing as a career occurs in this way, girls tend to seek out information about the nursing profession and thus they avail themselves of a greater variety of sources of information, devote more thought to their choice and consequently are more able to explain the reasons for their choice of nursing.

4. What characteristics of nursing do these girls find attractive?

As a group, girls who choose nursing late appear to be able to list a wider variety of characteristics of the profession that they find attractive. In particular, they indicate a liking for the job of nursing itself more frequently than those who choose this occupation earlier.

5. What kinds of girls choose nursing late, after having abandoned a previous choice of another occupation?

Of those not considering nursing until late, 64 per cent do so after rejecting a previous occupational choice and, of all the provinces, Quebec has a far greater proportion in this group than any other province.

factors appear to distinguish between early choosers of nursing who also consider other occupations, and those who do not.

6. What kinds of girls consider nursing at an early age and eventually discard it in favour of another occupation?

About 60 per cent of those considering nursing early eventually reject this as their occupational choice.

These girls tend to come from blue collar and farm families rather than from professional and white collar families. It was also found that this particular pattern of occupational choice occurred much more frequently in Ontario than in the rest of Canada.

A higher proportion of this group do not have relatives in the profession who present them with this particular occupational model, and this appears to be particularly important in the case of those considering nursing early. These girls are also more likely to have had contacts with the nursing profession which resulted in negative reactions.

7. What do these girls dislike about nursing?

Girls who initially consider the nursing profession as a possible career before the age of thirteen are less likely to be able to say what they do not like about the profession. Those that are, indicate that the job itself is not interesting enough and that the training for nursing in nursing school is too long and difficult.

One in five of the girls in this group enter nursing because they encountered barriers in their endeavours to enter the occupation they initially selected.

6. What kinds of girls consider nursing after the age of thirteen and eventually discard it in favour of another occupation?

About one-half of those considering nursing late finally reject it in favour of another occupation, and this occurs considerably more frequently among girls in Ontario than in the other provinces.

The initial interest in nursing of girls in this group is much more frequently stimulated by high school vocational guidance counsellors than is the case for other girls.

7. What do these girls dislike about nursing?

Late choosers who eventually discard the choice of nursing are more likely to be able to indicate the features of nursing that they dislike. The principal reason for rejecting the choice of this occupation is that they do not think that they have either sufficient academic ability or the kind of personality that is appropriate for nursing.

Finally, in this chapter we endeavoured to see whether girls who entered the nursing profession through university were significantly different from those in hospital schools of nursing, and we came to the conclusion that they are different in certain important respects and similar in some others.

Specifically, girls in university schools of nursing are like other girls who choose this profession in their desire to have a job which is of benefit to society and helps people in need; they are also similar to other girls who choose nursing in that they see themselves as being able to control their emotions more than most other girls. But here the similarity ends.

Girls taking the university route to the nursing profession have very different social backgrounds and want different things from their occupation. University nursing students are much more likely to be upper class girls from urban areas, and to have more academic ability than girls in hospital schools of nursing. They are also more concerned to have a job that involves work which is interesting to them and are less likely to see nursing as satisfying them in this respect than do girls in hospital schools.

THE RECRUITMENT AND SELECTION OF NURSING STUDENTS

In the previous chapters we have been discussing the factors that affect the number of girls who want to become nurses. In this chapter we will turn to an examination of the effects of the policies of schools of nursing with respect to the recruitment and selection of applicants, and on the number and types of girls who become student nurses. In other words, the recruitment activities of schools of nursing may be seen as encouraging some girls to become nurses and discouraging others, and their selection procedures as constituting barriers which some girls can surmount while those who cannot are kept out of the profession; each therefore clearly has some effect on the supply of nurses. Our interest in these recruitment and selection procedures is thus mainly concerned with their effect on the supply of nurses.

To secure this information, we chose a sample of thirteen schools of nursing and interviewed the directors of each of these schools. The sample was chosen in such a way that we included in it both large and small schools, schools at sectarian and non-sectarian hospitals, and schools from each of the following five geographic regions: (1) Atlantic Provinces, (2) Quebec, (3) Ontario, (4) the Prairies, and (5) British Columbia.

Limited resources at our disposal required that we interview directors of only a small sample of hospital schools (we had to ignore completely university schools of nursing in this part of the research) and our conclusions must therefore be tentative in nature in so far as they are taken as applying to all schools of nursing in Canada.

A. RECRUITMENT POLICIES

The directors' attitudes towards the need for a recruitment programme depended to some extent upon whether the school had a sufficient number of applicants in relation to the number of students it wished to enrol each year. However, this was not always true, since we did find cases where schools with many more applicants than they could accept were using a considerable amount of their resources in recruitment programmes, even to the extent of organizing nurses' clubs in the high schools. The schools in the advantageous position of having a surplus of applicants over student places, tend to be the larger ones in the more

densely populated urban areas. The small schools in relatively rural areas seemed to be the worst placed in this regard, particularly where there were several small hospital schools serving the same relatively sparsely populated area.

Hospital schools in Quebec, however, did not seem to conform to this pattern. Of the three schools visited in this province, one was extremely large while the other two were relatively small, and all were in a very favourable position with respect to the ratio of applicants to student places, although even here the position of the larger school was much better than that of the smaller ones.

At the time the directors of schools of nursing were interviewed, figures were obtained from them for the preceding year with respect to the number of enquiries received concerning entrance to the school, the number of official applications, the number of applicants accepted by the school, the number rejected and the reasons for rejection. Dividing the schools visited into two groups: (1) large schools, accepting 100 students or more each year and (2) small schools, accepting less than 100 students each year, we find the picture shown in Table 7:1.

TABLE 7:1

	Small Schools	Large Schools
1. Ratio of enquiries to students accepted	3.1	4.4
2. Proportion of enquiries finally resulting in applications	61	48
3. Proportion of applications accepted	53	48
4. Proportion of applications rejected.....	36	50
5. Proportion of applications withdrawn	12	2

It appears that large schools received a proportionately higher number of enquiries than small schools; a smaller proportion decided to officially apply for admission to large schools, but a smaller percentage withdrew after applying, and further, large schools appear to accept a smaller proportion and reject more than small schools. The difference in the proportion of applicants accepted is even greater than it appears from the above-mentioned table, since those who withdrew their application, in effect, reduced the number of applicants who could be accepted. When we correct for this fact, the proportions of applicants accepted are 60 per cent for the small schools, as compared to 49 per cent for the large schools. We suggest that these figures provide some evidence for the view that large schools are both seen as more attractive by potential students, and more favourably placed with respect to the number of applicants from whom they draw their students.

For the purpose of examining the recruitment policies of schools of nursing, we will therefore divide them into two groups: (1) large urban hospital schools and schools in Quebec (which tend to have a high positive ratio of applicants to student places) and (2) small rural hospital schools (which tend to have low and even negative ratios of applicants to student places).

1. Large Urban Hospital Schools and Schools in Quebec

The majority of directors of nursing reported a noticeable increase in the past two or three years in the number of girls enquiring about entrance to nursing school and in the number of official applications to their schools. A variety of reasons were offered for this, such as the fact that girls who formerly became teachers are now entering the nursing profession because the shortage of teachers is diminishing; with better pay and conditions and the raising of entrance requirements, the image of the nursing profession is improving; rarely was the factor of the increase in the number of girls in this age group seen as a possible explanation for a part, if not all, of the increase in the number of girls interested in nursing. However, we are not in a position to state to what extent this factor does account for this situation.

Generally speaking, the directors of these schools of nursing indicated little interest in recruitment programmes, pointing out that they receive far more applications to enter the school than they could grant, and that in any case, their students were the most effective means of recruiting new students (a view that was shared by almost all directors, whatever the size of the school), and that other people also helped such as graduate nurses, doctors at the hospital, and sometimes members of the ladies' auxiliary. With few exceptions, there were no formally organized recruitment programmes at the schools of nursing we visited, and their activities in this regard were restricted to supplying information *when requested to do so*. Some of these directors mentioned that they agreed to send someone to give a talk at a high school career day when invited to do so, and on occasions, even to a community organization which requested a speaker from the school. In addition, when the principal or counsellor at a high school wanted to organize a visit by a group of students in connection with career day, the school of nursing would arrange for them to tour the hospital. Other kinds of publicity were received by these schools such as notices in newspapers and on radio and television concerning student activities, graduation ceremonies and so on, but again, these were not the result of initiative on the part of the director, but rather they were solicited by others.

2. Small Rural Hospital Schools

The picture with respect to the smaller schools of nursing, however, was quite different. By and large, the directors of these schools either had a fairly extensive recruitment programme or felt the need of one sufficiently that they planned to institute one as soon as possible. In some cases, the smaller hospital schools not only faced competition from the larger schools in the more densely populated cities, but also from other small schools situated in their locality. In most such cases, the directors of the schools realized that they were competing directly with the neighboring schools and some indicated that in their recruiting efforts they tried to point out the advantages that their school possessed which the others did not. It must also be reported that, in other instances, attempts were being made by several small schools to co-operate with one another, by developing educational courses which were attended by students from the several schools

rather than each trying to offer its own. In other instances two schools in the same locality would combine to advertise nursing on school career days.

It seems fairly clear that among the hospital schools in a particular area, a kind of "pecking order" is established in terms of the perceived standard of training offered, and this prestige hierarchy is fairly commonly known among the girls who want to enter nursing school. Since the larger urban schools are usually seen as being the most preferred ones, they receive the lion's share of the applications, including the better academically qualified girls. While it is not always the case, the smaller schools are thus left with the smaller number of applicants among whom there tends to be a lower proportion of the more academically able girls. In the present situation, where most directors say that they feel substantial pressure to raise both the standards of the education they provide and the entrance requirements of their school, the problem of increasing the number of applicants in order that they can select students of higher academic ability is an acute one, and attempts to solve it include the institution of recruitment programmes where they do not exist and the overhauling of those already in existence. While not all of these schools employed all of the following procedures, the list will provide some indication of the various practices followed by the schools of nursing we visited:

a. Literature

While most of the larger schools send out a form letter and accompanying brochures as a matter of course to all who write enquiring about the school, the smaller schools often take somewhat more pains to cultivate the interest of these girls. One director, for instance, said that from conversations with her students, it became clear that a prompt, personal reply to such letters was extremely important in persuading a girl to choose that particular school. Considerable concern was also expressed about the need to have a fairly elaborately printed brochure or calendar, which emphasized the attractiveness of the school buildings and residences, and which would appeal to girls and thus influence them to apply to that particular school. It should also be mentioned that almost every director interviewed mentioned the activities of the provincial nursing association in distributing literature about the nursing profession.

b. Lectures and Hospital Visits

Instead of waiting to be asked by high schools to participate in career days and to allow a group of girls to tour the hospital, some of the small schools take the initiative in these matters. In some cases, regular contact is maintained between the director of the school and high school principals and/or counsellors in the immediate vicinity and, in one case, in addition to this, the director had a policy of making a tour of all high schools in the outlying areas in the province, every two or three years taking along posters, brochures, application forms and giving talks to the students in each school. At another school, every high school in the province was invited each year to bring a group of students to visit the hospital. With regard to the use of high school counsellors for recruitment purposes, it should be mentioned that several directors of nursing complained that many

counsellors had misconceptions about the type of girl best suited to become a nurse. Usually it was said that such high school counsellors encouraged girls with low school grades, who were unqualified for most other types of work, to apply to enter nursing school and that this made it necessary for the director to make a special effort to persuade these counsellors to correct their erroneous impressions of the requirements for this profession.

c. Changes in Curricula

Some of the small schools were planning to increase the quantity and quality of the applicants to their schools by making various changes in the kind of education they provided their students. Co-operating with the local university to accept nursing students in some of their courses was one change being considered, which it was thought would improve the quality of the training offered and thereby increase the prestige of the school and thus its attractiveness to potential applicants.

d. Improvements in Facilities for Recreation and Social Activities

One of the ways in which directors hoped to attract a greater number of students, that was frequently mentioned, was that of persuading the Hospital Board to build a modern, spacious residence. Other efforts were being directed to a general improvement in recreational facilities and in organizing social activities, such as introducing a system of student government, making arrangements for the use of YWCA facilities and encouraging the organization of dances with local boys' schools and military academies. When such changes were made, it was intended to publicize them in the brochure distributed by the school.

Some schools reported the existence of auxiliary organizations or clubs for high school students and also a system whereby high school students could work in the hospital during the summer holidays. The effort required to organize these schemes appears to be quite considerable and, while many of the applicants to the school of nursing come from these clubs, most directors also pointed out that others did not eventually choose nursing as a career.

It is interesting to note that, although *all* of the schools of nursing visited employed some of the recruitment practices referred to above (even though they were not part of an organized plan), which utilized varying amounts of the schools' resources, only one director was considering undertaking some study of the effectiveness of the various activities in which they were engaged. Most of the directors, when asked if they had any idea of the results obtained from these efforts, said that they were not sure how effective they were.

B. SELECTION PROCEDURES

Although the selection procedures at each school differ from those used in every other school in some detail or another, there are overall similarities in the general pattern followed by all of the schools of nursing visited, and we will indicate the main outlines of this pattern, noting any significant deviations from it by particular kinds of schools.

1. Who Considers the Application Submitted?

All schools, except some of the very small ones, have an Admissions Committee. The number of persons on these committees varies, but the modal number is five. The director of nursing education is always a member of the Admissions Committee, and in most cases she has the power of veto over the decisions of the committee, although we were informed that this power was rarely used. However, in most cases, the director of nursing or the director of education on the Admissions Committee appeared to be the one whose position may be characterized as “*primus inter pares*”. Generally speaking, she was more closely involved with the answering of enquiries, with the securing of all the relevant information from the applicants, (the director frequently interviewed more of the applicants than the other members of the committee), and sometimes she was the first member of the committee to make the decision as to whether each applicant should be accepted or rejected. In all but one instance, the members of the Admissions Committee were on the staff of the hospital; in the one exception, a principal from a local school was also a member of the committee. In most cases, the method by which applicants are considered by the Admissions Committee is that the director of education distributes the dossiers of all applicants to the members, who indicate their opinion as to whether each should be admitted or not; the committee meets formally only to discuss those cases where there is a lack of agreement between the members on this initial evaluation, and this apparently occurs with respect to only about 5 per cent of the applicants.

2. Criteria for the Evaluation of Applicants

Generally speaking, three characteristics of each applicant are considered by schools of nursing in determining whether to admit or not; (a) academic performance, (b) health and (c) “personality”, and each of these will be discussed in turn.

a. Academic Performance

Apart from the minimum legal academic requirements for admission which vary from province to province, each school has its own additional criteria for evaluating the applicant's academic performance for admission purposes. Some of the larger hospital schools adopt a minimum academic standard which is higher than the legal minimum, and are in the fortunate position of having a sufficient number of applicants to be able to refuse admission to anyone who does not meet these higher standards. Other schools that have higher standards than the legal minimum are not in this position, and consequently they give preference to applicants who meet these higher standards and only accept those below the standard, if there are places left after accepting the more academically qualified girls. The higher standards are sometimes defined in terms of an additional year's schooling, sometimes in terms of higher grade average, sometimes in terms of a higher grade average for specific subjects (such as the natural sciences) and so on; the variety of academic entrance requirements and the variety of bases of evaluation

among the schools visited is enormous. However, in general, it can be said that every school in our sample indicated that an attempt was being made to raise the academic standards of the girls admitted to the school, even though in some cases the director herself deprecated this trend in schools of nursing. Generally, such directors were of the opinion that not all nurses had to be above average academically speaking, because many students of average scholastic ability could perform bedside nursing duties adequately. In fact, the opinion was expressed by directors on more than one occasion, that raising academic standards too much would result in attracting into the nursing profession many girls who, for various reasons, would not make good bedside nurses. The reason why directors who held such views nevertheless felt obliged to raise the academic standards of girls admitted to their schools appeared to be that they believed that most other schools were raising their standards, and if they did not follow suit it would seriously affect their ability to attract a sufficient number of students to fill the places in their schools and to attract competent staff to teach in the schools, principally because the prestige of the school would rapidly diminish. However, while all schools planned to raise their academic standards, the larger schools seemed much more confident of accomplishing this than did the smaller schools.

b. Health

All schools required every applicant to submit a medical report signed by her family physician and, in many cases, each girl had to pass a medical examination by a doctor in the hospital. Each director was asked to indicate which particular health characteristics were regarded as constituting a sufficient hindrance to the efficient performance of a nurse's duties, to warrant the rejection of a girl's application. Again, the replies were tremendously varied; the ailments ranged through skin diseases, "pains in the back", loss of limbs, obesity, asthma, tuberculosis, problems with the feet and so on.

c. "Personality"

Every director interviewed reported that in considering applications, efforts were made to secure information about each applicant's "personality" and this was taken into account when deciding whether to accept her or not. All schools required applicants to supply letters of reference from such people as high school principals, counsellors, physicians, and ministers and priests, and these references constituted one of the sources of information concerning the personality characteristics of the applicant. It should be mentioned that, although every school requires such references to be submitted, the vast majority of directors said that generally speaking, they were not very helpful because the references are almost universally favourable. Consequently, it was frequently claimed that only references from principals or counsellors who were personally known by the staff at the hospital were taken at all seriously.

A second source of such information is the interview that the applicants are asked to attend. Only girls who live within a reasonable distance from the hospital

are invited to be interviewed and, in no instance did every member of the Admissions Committee interview every applicant; usually, each girl was interviewed by the director of the school and/or one other member of the Admissions Committee. Most frequently, brief notes were made by the interviewer and these were added to the applicant's dossier to be read later by other members of the committee.

What kinds of personality characteristics did the interviewers look for? Once again, the variability between the schools we visited was considerable; the responses ranged from "I just make a note of her general demeanour" to the citing of a long list including such things as the girl's appearance, her manners and habits, her general disposition, whether she was a woman of refinement and culture, how nervous she was during the interview, masculinity, cleanliness, poise, whether she had a dominant mother, her enthusiasm, politeness, her approach to people, whether she was extroverted or withdrawn, and so on. However, certain of these characteristics are mentioned more frequently than others and we give below a list of the characteristics which were often given as important ones, to which special attention was paid:

"Personality Characteristics"

<i>Approved</i>	<i>Disapproved</i>
A happy person, an "extrovert" who is at ease when meeting strangers.	An "introvert", withdrawn, nervous in the presence of strangers.
A clean person, well-dressed, but conservatively.	An unclean person, dishevelled, untidy or loudly dressed.
Poised and polite.	"Skittish" and not sufficiently respectful.
A girl from a happy family.	Girl from an unhappy or broken home, submissive girl with a dominant mother.

The list of characteristics that are regarded favourably, present the picture of an average, "well adjusted", somewhat orthodox girl, while the list of disapproved characteristics tend to describe an unusual or unorthodox girl; in fact, several directors summarized their views of the two models in precisely this way.

Finally, some schools employ tests of various kinds and, in one way or another, use the results in making an evaluation of the applicant; there were still other schools who were considering the use of such tests in the very near future. According to a recent survey undertaken by the Canadian Nurses' Association, some 15 of 166 schools of nursing utilize some kind of personality test for the purpose of evaluating applicants for admission. However, as in the case of the other techniques for judging applicants mentioned above, no two schools used either the same tests or used the results of the tests in the same way. Generally speaking, it appeared that where such tests were used, their function was to

identify applicants whose scores on some personality dimension were outside the “normal range”; with respect to such applicants, some schools then considered the test results along with the report of the member of staff who had interviewed the girl, and sometimes a psychologist or psychiatrist was called in to interpret the test results to the director. In fact, we were invariably assured that the results of such tests were always used cautiously; that is between the test results and the interview report, the latter was given the greater weight and that only when the two evaluations were both negative would the decision be made not to admit the applicant.

3.Results of Selection Procedures

As mentioned previously, we obtained figures from the schools we visited concerning the number of applicants accepted and rejected in the previous year and the reasons for the rejection of applicants. We have already shown that the acceptance and rejection rates differ for large schools as compared with those of small schools; we now present the proportions rejected for various reasons:

	Per Cent of Those Applying	Per Cent of Those Rejected
1. Poor academic performance in high school.....	38.9	84.2
2. Poor health	1.7	3.7
3. “Personality” deficiencies	3.5	7.6
4. Other (e.g., below minimum legal age)	2.1	4.5
	46.2	100.0

It is clear that by far the most important criterion for rejecting applicants to schools of nursing is that of academic performance in high school; more than 8 out of 10 of the girls who are rejected are not acceptable for this reason. It is also interesting to note that on the average, almost 40 per cent of the applications received by nursing schools are regarded by them as being unacceptable because of low academic performance; of course some hospitals regard a higher proportion as academically inadequate and others a lower proportion and, since some girls apply to more than one hospital, it means that some girls who are rejected at one school are accepted at another so that the total number who are unable to enter a hospital school for this reason is much less.

The proportion who are rejected for health or personality reasons is extremely small indeed, less than 2 out of 100 and less than 4 out of 100 respectively. Considering the efforts that are made to try to prevent girls who are regarded as having inadequate personalities from entering schools of nursing, it is surprising to find that such a small number are eventually rejected on these grounds. From our discussions with the directors of the schools, there appear to be four reasons for this situation. First, many schools, especially the smaller ones, do not receive a sufficient number of applicants to enable them to “choose” students; if they are to fill all of the places available, they must accept almost everyone who applies (in fact, one director reported that in previous years, everyone who had applied

had been accepted at that hospital).¹ Secondly, even where Admissions Committees do have substantially more applicants than places, the emphasis has been first on raising academic standards and so, when the girls who do not meet these standards have been eliminated, the surplus of applicants over places is so small that, once again, there is little room for the use of yet another criterion of "personality".² Next, there is often disagreement between members of Admissions Committees as to which personality characteristics should be taken as being incompatible with nursing, and this is due to different perceptions of the role of the nurse. Finally, even where there is agreement concerning the types of girls who are less likely to make good nurses, there is considerable uncertainty among members of Admissions Committees as to whether the techniques available to them are effective in identifying the existence of the relevant personality traits among applicants. The majority of directors were less than satisfied with the procedures used for evaluating personality characteristics of applicants, which is no doubt responsible for the number of cases where tests were either already being employed or their use was being contemplated.

One clear impression left by the directors interviewed was that they all felt that the general attitude of the nursing profession was that the standard of nursing training should be improved, particularly academic training, and that to do this, schools of nursing should offer more and more academic courses and raise the academic requirements so that they would attract more academically competent girls. Further, several directors mentioned that they felt pressure to work towards these goals, from nursing associations, departments of education and other hospital schools.

Some directors accepted the view that nowadays nursing is not just cleaning floors and making beds but that it involves a whole host of skills for which a girl requires more academic training. These persons, therefore, felt the need to substantially improve the academic quality of nursing education and of nursing students, and were eager to adopt various policies aimed at changing the image of the nurse among prospective students, in order to attract a larger number of girls of high academic ability, and to discourage those with low high school grades.

There were others however who, while they recognized the pressure to accept this view, and almost invariably had plans to raise the academic entrance requirements for admission to their schools, nevertheless felt less than enthusiastic about the current trend in this direction. Several were of the opinion that far too much emphasis was being placed on attracting girls with higher than average school grades; that the most important function of a nurse ought to be "bedside nursing", and that it was not necessary for a girl to be brilliant academically in order to perform this role satisfactorily. There was even an implied view that the academically bright girl, who might best fit the new role definition, is not the best prospect

¹ In a recent survey undertaken by the Canadian Nurses' Association, 29 of 166 schools of nursing indicated that one of the reasons for their inability to admit the optimum number of students was an insufficient number of applicants.

² The same Canadian Nurses' Association survey showed that 47 of the 166 schools of nursing were unable to admit the optimum number of students because they lacked a sufficient number of applicants who met their academic standards.

for the "bedside nurse". This latter group of directors gave the impression that they knew the battle was lost, that the role of the nurse is changing, that they cannot successfully resist the pressures to raise the academic standards of the school, both for the admission of students and so far as the school curriculum is concerned, and yet they could not accept the changes enthusiastically. Frequently, these directors were the ones who appear somewhat at a loss to know what kinds of procedures to use to select the "new" kind of student.

Towards the end of the interview, directors were asked to give an overall evaluation of the quality of the students who were admitted to their schools under existing selection procedures. It is interesting to note that although some 20 per cent to 25 per cent of girls who enter nursing school drop out during the three years of training; when the directors were asked to indicate the proportion of the girls they had accepted that they eventually wished they had not, based upon their subsequent performance in the school, the vast majority decided that they made errors in the cases of only a very small proportion of the students they admitted to their schools. In fact, the instances where directors felt that even as many as 5 per cent of their student body should not have been admitted, were rare.

Here then is a somewhat anomalous situation; although the proportion of nursing school students who drop out is fairly high, directors felt that only a small percentage of mistakes were made in selecting students; further, while most students who are admitted to schools of nursing are seen as being sufficiently competent to be trained as nurses, we find that almost without exception these same directors are concerned about the effectiveness of existing selection procedures, and that most of them intend to raise their academic entrance requirements, that some have recently begun to use "personality tests" and still others are contemplating their use in order to improve their ability to select the right kind of student. We suggest that the reasons for these apparently inconsistent attitudes are: first, that not all directors are convinced of the need to substantially improve the academic quality of nursing school students. However, they institute policies which are designed to do just this, because they feel subject to pressures to do so, which they feel they cannot ignore because if they did, it would affect the prestige of the school and thus its ability to attract an adequate supply of students. Secondly, the discrepancy between the size of the "drop out" rate (an index of the effectiveness of selection procedures) and the directors' estimates of the errors made in selecting students is probably due to the judgment that many of those who drop out have the necessary competence to become good nurses, and that rather than trying to identify these cases at the time of selection, other policies could be followed which would reduce the number who leave the school before completing the training. At all events, if the directors are satisfied that 90 per cent or more of the girls they accept have the ability to become good nurses it would seem, from their point of view, that it is unnecessary for them to become as concerned as most of them appear to be, with the need to improve the quality of those applying to enter nursing schools and the selection procedures they employ.

C. SUMMARY

The primary purpose of the interviews with the directors of schools of nursing was to ascertain the effects of their recruitment and selection procedures in determining the types of girls who enter hospital nursing schools.

The principal criterion for the selection of students in schools of nursing is their academic ability, as measured by their high school grades; health and "personality" characteristics eliminate only a very small proportion of applicants.

The present emphasis on raising the academic standards for entrance into schools of nursing is seen by directors as having the effect of changing the image of nursing among female high school students, and it is believed that this tends to attract a higher proportion of girls with high scholastic ability, and to discourage those with low high school grades. Attempts are also made to persuade high school counsellors to change their image of the nursing profession so that they encourage the appropriate kinds of girls to consider nursing as a career.

From the data in Chapter II we can get some idea of the extent to which the schools have been successful in this endeavour up to the present time. It will be remembered that the highest proportion of girls choosing nursing came from those with grades between 60 per cent and 70 per cent. Only about half as many came from girls with grades of over 80 per cent. Of the girls who plan to become nurses, about one-half have grades between 50 per cent and 70 per cent, the remaining half is about equally divided between those whose high school grades fall into the 70 per cent – 80 per cent and above 80 per cent categories (only 5 per cent have 90 per cent or above). The average high school grade for all those choosing nursing is 68 per cent, which is lower than those for most other medium status jobs, except secretarial work (for which the mean high school grade is 67 per cent). The academic standing of girls choosing teaching as a career is substantially higher than that for girls planning to become nurses.

Although a popular model among directors of the type of girl most preferred for nursing school does not appear to have much influence on the selection of students from applicants, it does appear that the image that girls generally have of the kind of person a nurse usually is, is consistent with the preferred model of many directors. Several directors of schools of nursing describe their preference for student nurse, as a girl who has the desire to serve people (service oriented) and who is somewhat of a conformist; as we have shown earlier, girls who plan to become nurses are "average" in almost every characteristic we studied. They tend to come from middle class families, from medium-size towns, to have average grades, to hold values at the mid-point of the intrinsic-extrinsic scale, to see themselves as about average in terms of the personality characteristics of organizational and interpersonal competence and also self-confidence. In only two respects did we find those choosing nursing to be distinctly different from the average, namely, they place great importance on a job that is of benefit to society and they see themselves, and are seen by others, as having a high degree of self-control. It would seem therefore that, to the extent that schools of nursing prefer to attract

such girls, they are relatively successful in projecting these aspects of the image of the nurse among potential recruits.

With regard to the fairly universal attempt among schools of nursing to improve the academic quality of the students they accept, it is clear that the more prestigious schools are more successful in doing this, in the sense that they have the pick of the applicants and can therefore choose the most academically competent among them, which means that a higher proportion of their students have high scholastic ability. The directors of larger schools, therefore, tend to feel that they have little need for recruitment programmes and their efforts to attract girls to their schools are limited to meeting requests for speakers and literature. The smaller schools, on the other hand, which have barely enough applicants to fill the student places available, are more often engaged in fairly vigorous recruitment programmes in order to increase the overall number of girls who apply to enter nursing schools and to improve their competitive position with respect to the other schools of nursing in the same locality.

The net effect of recruitment and selection policies of schools of nursing is that many girls apply to several schools, hoping to be accepted by the one with the highest prestige. This type of school selects the best academically qualified among the applicants and rejects the others. Some of these latter are then accepted by the less prestigious schools. (We are not suggesting that no bright students go to smaller schools; but only that proportionately they tend to have fewer). During this process, a very small number of applicants are rejected for reasons of health or "personality" but it is probable that only the most extreme cases, whose disabilities in these respects are easily identifiable, are eventually rejected. However, it is probable that the popular image of the nurse in terms of "personality characteristics", among potential recruits to nursing, is influenced to some extent by the preferences that those in nursing schools have with respect to the personality characteristics of nursing students. It appears that there is a fairly high degree of agreement between the two, which suggests that applicants are to some extent pre-selected in terms of broad personality types.

In conclusion, however, it is our opinion that the proportion of girls who want to become nurses who do not eventually get into schools of nursing is probably small, so that the net effect of their recruitment and selection policies is to keep only a few out of the profession, but those who are allowed in are distributed unequally in terms of academic ability among the various schools.

D. MALE NURSING STUDENTS

The number of schools of nursing who at present admit male nurses is quite small; 25 out of 170, and the proportion of nursing school students who are male is less than one-half of one per cent. Among the few nursing schools that we visited, we did find one or two where the directors either indicated that they were thinking of trying to attract male students, or who said that they would not mind having such students. Generally speaking, the prevailing attitude seemed to be that the additional problems that would be created by accepting male students probably did not justify

the effort required to recruit them, because the number that could reasonably be expected to be attracted into nursing school was so small. The fact that little effort is made to interest boys in this profession is probably responsible, to some small extent, for the fact that there are so few male students in schools of nursing; however, as we will show in the next chapter, the potential effectiveness of recruitment programmes designed to increase the number of men in the profession is, in our judgment, very limited.

THE ATTITUDES OF MEN TOWARDS NURSING AS A CAREER

The number of men who enter the nursing profession is extremely small; out of 21,858 students in all schools of nursing in Canada in 1961, only 90, or four-tenths of one per cent were men. For this reason, we did not think it worthwhile to undertake as extensive a study of the factors affecting the choice of nursing by men as we did in the case of women. However we did think it advisable to secure some information concerning the attitudes of men towards this profession, particularly because they might be considered as a possible source of recruits. We therefore undertook a small scale survey in which we administered a questionnaire (see Appendix B) to a purposive sample of male high school students in their junior matriculation year, which included equal proportions of students from upper middle class high schools, and urban lower middle class high schools and from rural high schools. (See Appendix A for details). It should be pointed out that one of the largest rural high schools in the sample did not return the questionnaires, with the result that boys from rural areas are somewhat under-represented in our sample; this must be borne in mind in interpreting the results discussed below.

The principal objectives in this limited study were to secure information from our sample of male high school students which would enable us to ascertain:

1. the occupational values of boys,
2. the prevailing image of the nursing profession held by boys,
3. the extent to which boys are willing to consider the nursing profession as a career, and
4. the factors that are associated with each of the above.

As far as possible, the information with respect to these matters was gathered in such a way as to permit us to compare the responses of the male high school students with those of the girls in our previous samples and we will begin by presenting these comparisons.

A. HOW MANY BOYS CONSIDER BECOMING MALE NURSES?

In the first place, about 50 per cent of the boys said that they planned to go to university as compared to only 28 per cent of the girls. Even though our male sample is somewhat over-represented by upper class boys, this figure (as well as that for the girls) is clearly considerably greater than the actual proportion

who finally enter universities. However, the ratio of boys to girls is fairly close to the actual ratio in universities which suggests that, since nursing is a medium status occupation which does not require university training (except for the small minority attending university schools of nursing), the number of boys who aspire to medium status jobs as a group is much less than the number of girls considering this type of job and thus, the potential pool of male recruits into the nursing profession is much smaller than the pool of girls who consider this occupation.

The second significant difference between the occupational aspirations of boys and girls is that, whereas 21 per cent of our girls planned to enter the nursing profession, not a single boy in our sample gave this occupation as his choice; although about 10 per cent said that they had considered it at one time or another (as compared to 52 per cent of girls). We will return to this finding later on and discuss it in greater detail. For the rest of this chapter we will be trying to answer the questions: "Why do boys not consider nursing as a career as frequently as girls?" and "What kinds of boys are most likely to be willing to consider nursing as a career, and how can they be encouraged to do so?"

B. WHY DO BOYS NOT CONSIDER BECOMING MALE NURSES?

1. Occupational Values

Let us turn first to the kinds of objectives boys seek, as compared to girls. This is shown in Table 8:1.

The first thing to notice is that for all of these values taken together, a higher proportion of boys (\bar{x} equals 42 per cent) regard them as extremely important, than is the case for girls (\bar{x} equals 32 per cent), which reflects the greater importance of occupations.

The three values which are rated extremely important by the greatest number of persons is the same for both boys and girls, namely: family-benefiting values (3), self-development (4), security (8); approximately three-quarters of the boys and two-thirds of the girls thought these values were extremely important. The remaining values are not held to be as important by such large proportions but, except in three instances, the number of boys as compared to girls who do, is about the same. The three notable exceptions are: (1) a much higher proportion of boys (57 per cent) than girls (22 per cent) regarded as extremely important that they secure "a job which pays well"; (2) a much lower proportion of boys (11 per cent) than girls (42 per cent) placed a high value on having a job in which they "can help people who are faced with human problems and suffering"; and (3) a higher proportion of boys (47 per cent) as compared to girls (25 per cent) importantly valued a job in which they "meet interesting clients and work with the kind of people whose company they enjoy". The differences in the first two of the three instances are particularly large and, as we shall show later, the findings that income is much more important and helping people much less important to a boy than to a girl, are two of the factors which affect their attitudes towards nursing and therefore their choice of this occupation as a career.

TABLE 8:1
COMPARISON OF OCCUPATIONAL VALUES
HELD BY BOYS AND GIRLS

Value Held	Per Cent Rating Each Value "Extremely Important"	
	Boys	Girls
1. A job in which I can travel and work in exciting places	20	13
2. A job which will permit me to be creative and original	24	21
3. A job with an income which will allow me to provide my future family with the extra things we would like	76	59 ¹
4. A job for which I have special abilities and aptitudes, where I can develop and excel	74	55
5. A job in which I meet interesting clients and work with the kind of people whose company I enjoy	47	25
6. A job in which I would be looked up to by other people in the community	18	11
7. A job in which I can help people who are faced with human problems and suffering	11	42
8. A job which will enable me to look forward to a stable, secure future	76	63
9. A job which pays well.	57	22
10. A job in which I work in pleasant surroundings ...	31	33
11. A job in which I am not too closely supervised ...	22	12
12. A job which is considered masculine	18	— ²
13. A job which doesn't take me away from my life with my future family	46	— ²
14. A job where I can help people directly	12	— ²

¹ The wording of the statement given to the girls was slightly different. It said: "A career in which I can always be sure of finding a job if I need to provide extra money for my future family".
² Girls were not given this statement.

2. Perceptions of Nursing as a Career

Both boys and girls were asked to check from a list of statements those that they thought accurately describe nursing; the results are shown in Table 8:2.

Of the 14 statements in the list, 10 were given to both boys and girls and of these, 2 involved positive evaluations of nursing (3 and 5), while 8 constitute negative evaluations (1, 2, 4, 6, 7, 8, 9 and 10). Comparing the perceptions of boys and girls with respect to the nursing profession, we find that, whereas the proportion of girls who see attractive characteristics in nursing is over three times as great as the proportion who see negative features (61 per cent vs 19 per cent),

TABLE 8:2
COMPARISON OF BOYS' AND GIRLS' PERCEPTIONS OF NURSING

Statement	Per Cent who Said That Each State- ment Accurately Described Nursing:	
	Boys	Girls
1. Requires a long period of training which I would prefer not to have to go through.....	23	24
2. Does not pay well enough.....	43	13
3. Provides an adequate income.....	26	46
4. Involves working in an atmosphere of sickness and death which I wouldn't like.....	39	37
5. Would give me tremendous satisfaction in knowing I am helping people in need.....	22	75
6. Is one which people generally don't regard very highly.....	30	3
7. Involves too much discipline and lack of freedom.	30	16
8. Requires too much dedication and self-sacrifice..	22	15
9. Would involve irregular hours and shift work which I don't like.....	41	28
10. Involves working frequently in situations with unpleasant odours and the sight of blood which I would prefer to avoid.....	31	26
11. Offers security and the assurance of being able to find a job.....	37	— ¹
12. Involves following orders given by doctors, instead of making decisions yourself.....	45	— ¹
13. Involves following orders given by head nurses, who are usually women.....	43	— ¹
14. People generally think of that kind of work as being for women, and I would feel like a sissy going into it.....	33	— ¹

¹ Girls were not given this statement.

in the case of boys, a greater number see negative features than see positive ones (33 per cent vs 24 per cent). Specifically, three out of four girls (or over three times as many girls as boys) see nursing as being an attractive occupation because it would give them tremendous satisfaction in knowing they were helping people in need. In addition, almost half of the girls think that a nurse's income is adequate and only 13 per cent regard it as insufficient, while on the other hand, only one-quarter of the boys view nursing as providing an adequate income and almost one-half feel that it does not pay enough. The two characteristics of nursing that most girls find attractive then, are not viewed similarly by the vast majority of boys.

Turning to the disadvantages of nursing, it is to be noted that about as many boys as girls see the following negative features of nursing: (1) the long period of training, (2) that it requires too much dedication and self-sacrifice and (3) that it involves working in an atmosphere of sickness and death and facing situations with unpleasant odours and the sight of blood. Usually, between one-quarter and

one-third of both boys and girls saw these as features of nursing which they did not like. The similarity between boys and girls in the last instance is particularly interesting. It will be recalled that among girls, this characteristic of nursing was especially important in determining whether a girl chose nursing as a career or not, but it is clear that this particular feature of nursing is not responsible for the fact that boys rarely select this occupation.

The four negative features of nursing that are seen by a much larger proportion of boys than girls are: (1) the low rate of pay, (2) the relatively low prestige of nursing, (3) the irregular hours and shift work and (4) the fact that it involves too much discipline and lack of freedom.

To these four characteristics must be added a fifth. Since we assumed that the occupation of nursing would be seen by men as one primarily populated by women, both boys and girls in our samples were asked about their attitude towards working in a job normally identified with the opposite sex; the girls were asked how they would feel about going into a job "mainly filled by men", while the boys were asked how they would feel about going into a job in which "most of the people doing the same work were women". Forty-seven per cent of the boys said that they would prefer not to have an occupation of this kind or would never consider such a job, while 34 per cent of the girls gave this response. However, when the boys were asked how they would feel about working in an occupation where they had to follow directions given by women, this proportion increased from 47 per cent to 65 per cent. If we now look at Table 8:2, we find that almost one-half of the boys see nursing as an occupation in which they would be required to follow orders given by head nurses who are usually women, from which it is clear that one of the important reasons why men do not find nursing attractive is that a substantial proportion of them would not like to be supervised by women.

The boys were also given an opportunity to list additional reasons why they did not want to be nurses. Of those who took advantage of this opportunity, most were rather unspecific in their replies, noting either a general lack of interest or stating that they preferred their own choice. However, others referred to the limited opportunity for advancement or to the lack of stimulation and challenge.

Our male high school students were also asked: "Would you ever consider becoming a male nurse?" Less than 5 per cent of our sample said that they would enjoy being a male nurse, and over 95 per cent said they would not. Of this latter group who said they would not like to become a male nurse, 48 per cent said it was because "that kind of job is for women", 34 per cent because they did not "care for a job working that closely with human problems and suffering" and 13 per cent gave as their reason that "it does not pay well enough".

Finally, a question asked of boys in our sample was: "what kinds of jobs do you think a male nurse does in a hospital?" Respondents were allowed to give more than one answer and these have been grouped in the following categories, against each of which is shown the proportion giving that answer:

	<i>Per Cent Giving This Answer</i>
1. Same work female nurses do	55
2. Heavier jobs females cannot do	16
3. Jobs embarrassing if done by female	12
4. Miscellaneous normal nursing duties	8
5. Menial tasks	2
6. Assist doctor on higher level of nurse	11

For more than half of the boys, the general impression of the work that men would do in nursing is that it would be the same as that performed by the women in this profession, while a small proportion think that male nurses would undertake those jobs which are either too heavy or embarrassing for women to do. Only one boy out of ten who would not like to become a nurse, sees the role of a male nurse as involving more responsible work than that performed by female nurses.

3. Parental Support

Both boys and girls were asked how they thought their parents would react if they were to choose nursing as a career. While 52 per cent of the girls said their parents would encourage them to become a nurse, only 12 per cent of the boys thought that this would be the case, and 29 per cent thought that their parents would be opposed to such a choice.

4. Information about Nursing

In contrast to the girls, when boys were asked: "Have you ever read or heard anything which provided you with information about the occupation of male nurse?", 85 per cent said that they had never received any information. The 15 per cent who had, were about equally divided between the following sources of information: (1) heard something about it in conversation with parents or friends, (2) had seen something about it on the Ben Casey television show, (3) had read something about a male nurse and (4) had talked with a female nurse. Only one boy in the sample had talked with a male nurse. Furthermore, not only had 85 per cent of the boys never received any information about the occupation of male nurse, but almost one out of five of the sample had never heard of this occupation and were not aware that some men do work in hospitals as male nurses.

5. Summary

At the beginning of this chapter, we indicated that while one out of five girls planned to enter the nursing profession, this choice is made only very rarely by boys. The foregoing discussion, therefore, has been primarily concerned with endeavouring to answer the question: "Why do such a small number of boys plan to become male nurses?" We may now summarize the answer to this question that is indicated by our data:

a) First, a higher proportion of men aim for high status jobs, which means that there is a smaller pool of boys who consider medium status occupations (of which nursing is one) than is the case for girls.

b) Next, almost one-fifth of all boys have never even heard of the occupation of male nurse, so that it is not even considered as a possible alternative by this group.

c) In any case, the most attractive feature of nursing for girls, that it involves helping people in need, does not appeal to many boys and, in fact, is given as a reason for *not* liking nursing by almost four boys out of ten.

d) Nursing is regarded as a woman's occupation and therefore as inappropriate for a man. The majority of boys see nursing as populated almost exclusively by women; as an occupation where male nurses are principally engaged in the same kind of work as that performed by the women in this occupation; and where men are subject to orders given by women. These perceptions may also be responsible for the fact that more boys see nursing as involving too much discipline and a lack of freedom than is the case for girls. When asked directly : "Do you feel that helping people in the way that nurses do is something that women are better at than men?", 75 per cent of the boys said "Yes".

e) Nursing is not only seen as being primarily a woman's occupation, but it is also seen as lacking certain other characteristics that a boy regards as more important than a girl does, namely: (1) the nursing profession is seen by a substantial proportion of boys as providing an inadequate income and, possibly as a result of this, (2) that it has a low degree of prestige. In addition, it is seen by some as a job which does not offer sufficient opportunities for advancement or challenge. When our male respondents were asked: "Do you think that men who go into male nursing are different from men who go into other occupations?", 25 per cent said "yes", 75 per cent said "no". Those who replied in the affirmative were then asked to describe the ways in which they thought male nurses were different from other men. Of these replies, almost one-half said that male nurses were more interested in helping people than other men. However, 20 per cent said that they thought male nurses were more effeminate, and 20 per cent said that they had less intelligence or ambition (or they would have become doctors).

f) The atmosphere of sickness and death and the situations that have to be faced, which involve unpleasant odours and the sight of blood, are negative features of nursing for just less than one in three boys, but this is about the same proportion as in the case of girls.

g) Finally, very few boys possess information about the occupation of male nurse and an equally small number believe that they would be encouraged to pursue this career by their parents; in fact, almost one-third of our boys felt that their parents would actively discourage them.

C. WHAT KINDS OF BOYS ARE POTENTIAL CANDIDATES FOR MALE NURSING?

We now turn to the question concerning the kinds of boys who could be considered most likely to be potential recruits into the nursing profession and how they might be encouraged to do so.

In order to analyze the data for factors which may be associated with the willingness on the part of boys to consider male nursing as an occupation for themselves, it was necessary to develop an index of favourableness of "disposition towards nursing", analogous to that constructed for our sample of girls.¹

1. Background Characteristics

It will be seen from Table 8:3, that disposition towards male nursing appears to be related to social class. Those who are more willing to consider becoming

TABLE 8:3
SOCIAL CLASS AND DISPOSITION TOWARDS MALE NURSING

Social Class of Parents	N	Per Cent of Each Social Class Indicating Disposition Towards Male Nursing:			
		Favourable ← → Unfavourable			Total
		1	2	3	
Professional and managerial.....	48	4	48	48	100
Clerical, sales and service occupations....	21	5	43	52	100
Skilled and unskilled.....	25	16	56	28	100
Farm.....	6	0	50	50	100
No response.....	19	21	26	53	100
Per cent of total.....	119	9	46	46	100

¹There were three potential candidates for such a variable: (1) the responses to the question, "Would you consider becoming a hospital technician?" when it was initially presented with the role of "hospital technician" undefined, (2) the responses to the question "Would you ever consider becoming a male nurse?", and (3) the responses to the question "Do you think you would be interested in becoming a hospital technician?" when finally presented with the definition of what was meant by "hospital technician". The last possibility was chosen for the following reasons: (1) while the undefined use of "hospital technician" had the advantage of being free of connotations of male nursing, there seems a reason for doubting the assumption that students perceived it as being at all similar to male nursing; (2) the extremely small percentage of boys who indicated favourable attitudes on the second questions which is probably due to the obvious association of the occupation, defined in this way, with females, resulted in the case of this extreme definition, in such an uneven distribution that it was not of much use for the purpose of comparing boys on other factors; (3) the definition of "hospital technician" given in the third possibility, corresponds fairly well to the actual occupation of male nurse and at least partially avoids the culturally defined overtones associated with "male nurse"; (4) probably most important, only the third possibility furnishes a real continuum of responses, since it includes a "possibly" category as well as "yes" and "no" categories.

Therefore, the index used for "disposition towards male nursing" was the response to the question: "Do you think you would be interested in becoming a hospital technician?" when the definition of the job was given, and this item was run against factors which we thought might be associated with a willingness to consider nursing.

a “hospital technician” tend to come from working class, non-farm families. It may also be associated with a lack of social mobility, in that one-half of those who like the idea of becoming a “hospital technician” plan to take a job immediately after high school, while only 15 per cent of the other boys do.

2. Values

Table 8:4 shows the proportion of each of the three dispositions towards nursing categories who rate as “extremely important” each of the values presented to them. The most noticeable differences between those with favourable as compared to unfavourable attitudes towards male nursing, are those with respect to the desire to have a job: (1) which involves helping people who are in need; (2) which pays well and (3) which permits one to be creative and original. Those most favourably disposed towards male nursing are likely to be more interested

TABLE 8:4
DISPOSITION TOWARDS MALE NURSING AND OCCUPATIONAL VALUES

Statement	Per Cent of Each Disposition Towards Male Nursing Who Rated Each Statement as Extremely Important		
	Favourable <-----> Unfavourable		
	1	2	3
1. A job in which I can travel and work in exciting places	11	17	25
2. A job which will permit me to be creative and original	11	13	35
3. A job with an income which will allow me to provide my future family with the extra things we would like.....	89	77	72
4. A job for which I have special abilities and aptitudes, where I can develop and excel...	67	70	79
5. A job in which I meet interesting clients and work with the kind of people whose company I enjoy	33	53	44
6. A job in which I would be looked up to by other people in the community.....	0	23	15
7. A job in which I can help people who are faced with human problems and suffering ...	22	11	8
8. A job which will enable me to look forward to a stable, secure future.....	89	85	65
9. A job which pays well	33	58	58
10. A job in which I work in pleasant surroundings.....	0	32	35
11. A job in which I am not too closely supervised.....	33	19	23
12. A job which is considered masculine	11	17	23
13. A job which doesn't take me away from my life with my future family.....	44	55	37
14. A job where I can help people directly	11	9	13
Total	9	53	52

in having a job in which they help people in need, and less likely to be concerned with opportunities for creativity and high income in their job. To a lesser extent, it appears that those attracted towards nursing are less inclined to want a job which mediates such extrinsic values as working in pleasant surroundings and meeting interesting people. It will be remembered that girls who planned to become nurses held a very similar configuration of values to this.

3. Parental Support

As shown in Table 8:5, boys favourably disposed towards the occupation of "hospital technician" are more apt to believe that their parents would support this decision.

TABLE 8:5
DISPOSITION TOWARDS MALE NURSING AND
PARENTAL SUPPORT FOR THIS OCCUPATION

Perceived Parental Support for Choice of Male Nursing	Per Cent of Each Disposition Towards Male Nursing Category Perceiving Parental Support:			
	Favourable ←————→ Unfavourable			
	N	1	2	3
They would encourage me to be a nurse.....	13	33	12	9
They would think it was alright..	44	44	51	30
They would not care one way or the other.....	19	11	16	21
They would not particularly like the idea.....	25	11	18	32
They would be very much opposed	6	0	4	9
Per cent of total	107	100 (9)	100 (53)	100 (52)

4. Attitudes Towards the Atmosphere of the Hospital

From Table 8:6 it will be seen that being able to cope with the atmosphere of sickness and death and unpleasant odours and the sight of blood is associated with positive attitudes towards taking a job in a hospital.

The last question that concerns us in this chapter is: "How can these boys be encouraged to choose nursing as a career?"

It will be remembered that no boy in our sample was considering becoming a male nurse at the time he completed the questionnaire. However, about 10 per cent had considered this occupation in the past; 2 per cent seriously, and 8 per cent somewhat casually. Further, when the boys were asked whether they would enjoy becoming male nurses, less than 5 per cent said they would.

TABLE 8:6
DISPOSITION TOWARDS MALE NURSING AND PERCEPTIONS
OF CHARACTERISTICS OF THAT OCCUPATION

Characteristic of Male Nursing	N	Per Cent of Each Disposition Towards Male Nursing Category with Different Perceptions of that Occupation:		
		Favourable \longleftrightarrow Unfavourable		
		1	2	3
(i) Involves working in an atmosphere of sickness and death which I would not like:				
Does not describe nursing..	69	100	66	48
Describes nursing.....	22	—	17	25
Is an important reason why I would not enter nursing...	23	—	17	27
Total	114	100 (9)	100 (53)	100 (52)
(ii) Involves working frequently in situations with unpleasant odours and the sight of blood, which I would prefer to avoid:				
Does not describe nursing..	78	89	70	64
Describes nursing.....	24	0	22	23
Is an important reason why I would not enter nursing...	12	11	8	14
Total	114	100 (9)	100 (53)	100 (52)

Before data were gathered for this study of attitudes towards male nursing, it was suspected that boys’ attitudes towards this profession would be negative because of their perception of nursing as being essentially a female occupation because of its perceived low prestige and because it is seen as a social service occupation, Therefore, before the subject of male nursing was mentioned on the questionnaire, our respondents were asked to give their attitudes to similar occupations. There were five such questions as follows:

- 1) “If you had to go into military service, would you be interested in becoming a medical corpsman?”
- 2) “If you had the ability and the financial resources to get the training, would you like to have become a doctor?”
- 3) “How would you feel about working as an ambulance driver?”

- 4) "If you could afford the training necessary, would you ever consider becoming a hospital technician?"
- 5) "With the increasing complexity of modern hospitals, one new position which is being considered is that of "hospital technician". This occupation will be designed for men with training in certain medical techniques and the ability to work with doctors in the care of patients. The training would be less than that required of doctors. A hospital technician would take care of hospital duties for which the normal nursing staff is not well suited."
- 6) "Did you ever consider becoming a social worker?"

The six items listed above, together with the question relating to attitudes towards the occupation of male nurse, were selected because they represent, in some degree of isolation, different dimensions of the job of male nursing and therefore, by comparing the responses of our male subjects to the various questions, we can make inferences concerning the probable effect of each of these dimensions on boys' occupational choices. The first five questions listed above refer to occupations which involve work helping sick people, as does male nursing but they are likely to be seen as "more masculine", or more appropriate for men than is male nursing. Social work, on the other hand, involves helping people in different ways from the medical occupations and, like being a doctor, has somewhat more prestige than the other occupations. Similarly, within the medical professions, doctors have more prestige than the others. It was thought that such comparisons as these in terms of the proportions of boys considering these occupations would provide useful information concerning the effects on boys' choices of occupations, of these three aspects of occupations: (1) its prestige, (2) its involvement with helping people, and (3) its association with "female-ness" as against "male-ness".

The proportions of boys willing to consider each of these occupations are given below.

<i>Occupation</i>	<i>Per Cent Willing to Consider</i>
Male Nurse	5 - "yes"
"Hospital technician"	23 - "yes"
"Hospital technician" with explanation of duties involved	9 - "yes": 46-"possibly"
Medical Corpsman	26-"yes"
Doctor	28-"yes"
Ambulance Driver	27-"yes"
Social Worker	23-"yes"

It is unfortunate for the purposes of the above comparison that, with respect to the question concerning the job of "hospital technician" in which the job was defined, we used a different way of response categories from that used in the other questions. However, as will be pointed out later, this had an advantage in another

respect. At all events, it is clear from the above responses that the proportion of boys who would consider becoming a male nurse is considerably less than the proportions willing to entertain the idea of entering each of the other occupations, and we suggest that this is further evidence for the view that the perception of nursing as essentially a woman's occupation constitutes an important negative feature of male nursing. All of the other medical occupations included were almost certainly viewed as being more appropriate for men, and all were more attractive to our male respondents. It is particularly interesting to note that even social work, which is an occupation largely dominated by women, is seen as relatively attractive by the boys in our sample. This is no doubt due to two principal factors: first, it has more prestige in the sense that it is probably seen as an occupation requiring some university education and second, because of this and because our sample tends to be over-represented in upper class boys, the proportion willing to consider it is probably higher in our sample than in the population generally.

It is somewhat surprising that about as many boys would consider becoming a doctor as would consider the other occupations of medical corpsman, ambulance driver and "hospital technician". It is possible of course that, although the question specified that the respondent should assume that he had the ability and financial resources to get the training necessary to become a doctor, the boys in our sample found it difficult to answer the question under these hypothetical conditions.

There is another way in which these data can be used in an attempt to find out which characteristics of an occupation like male nursing are attractive to those who are favourably inclined towards this occupation, and also to ascertain whether there are certain aspects of the occupation which, if changed, would attract others. This is to compare the attitudes towards other occupations of those who are favourably and unfavourably disposed towards male nursing. These data are presented in Table 8:7.

It is important to notice that attitudes towards becoming a "hospital technician" are associated with attitudes towards becoming a doctor, a medical corpsman, an ambulance driver and a social worker; a person with a favourable disposition towards one is likely to have favourable attitudes towards all of the others, and vice versa. Taking those with favourable dispositions towards the occupation of male nurse, we find that of the occupations compared, about an equal number would like to become doctors and medical corpsmen, that social work comes next in popularity among members of this group and ambulance driver last. This suggests that those favourably disposed towards nursing are attracted to it because it is an occupation in which they can help people in need.

On the other hand, of the middle group (those who might possibly be interested in becoming a nurse), the most popular occupation among those compared is that of ambulance driver and the least popular, that of social worker. This suggests that these boys might be children of lower class parents or that they are more

TABLE 8:7
DISPOSITION TOWARDS MALE NURSING
AND INTEREST IN OTHER SELECTED OCCUPATIONS

Disposition Towards Male Nursing		N	Per Cent of Each Disposition Towards Male Nursing Category Interested in Other Occupations	
			Yes	No
(i) If you were to go into military service would you be interested in being a medical corpsman?				
Attitude toward becoming a "hospital technician":	Yes	8	75	25
	Possibly ...	53	34	66
	No	52	14	87
	Total	113	27	73
(ii) If you had the ability and the financial resources to get the training, would you like to become a doctor?				
Attitude toward becoming a "hospital technician":	Yes	9	78	22
	Possibly ...	53	36	64
	No	51	14	86
	Total	113	29	71
(iii) How would you feel about working as an ambulance driver?				
Attitude toward becoming a "hospital technician":	Yes	7	57	43
	Possibly ...	49	45	55
	No	46	13	87
	Total	102	31	69
(iv) Would you ever consider becoming a social worker?				
Attitude toward becoming a "hospital technician":	Yes	8	63	38
	Possibly ...	48	31	69
	No	47	15	85
Total		103	26	74

concerned to have a job that is masculine, or both. On checking these two notions with our data, we find that the first is not correct, but there is some evidence for the latter.

Finally, of the boys who have unfavourable attitudes towards the occupation of "hospital technician", the vast majority also have unfavourable attitudes towards all of the occupations we listed. It is important to note that 85 per cent or more of those who dislike nursing also consistently dislike the other occupations.

Another approach taken in the questionnaire was to suggest to respondents that it was possible that certain changes might take place in the division of labour within the nursing profession and that therefore the role of the male nurse might be altered in the future. Various possible changes were then listed and the boys were asked to indicate whether such changes would affect their consideration of this occupation as a career. The question asked and the tabulation of the responses are shown below.

“The role of the nurse in the hospital is undergoing some changes. It is possible that in the future more changes may take place, leading to new positions and greater specialization. Some possible changes are outlined below. If any of these changes might lead to a position which you would consider going into, make a check in the space provided.”

Per Cent Checking

1. A position as surgical technician, with greater responsibility assisting in the operating room	23
2. Better pay for registered nurses	18
3. Special administrative positions, co-ordinating nursing care	6
4. Positions in which the more menial tasks of nursing are handled by subordinates	8
5. Position in which I had special responsibilities for male patients	9
6. None of these changes would make any difference to me.	34

These results suggest that the changes that are most likely to make nursing more attractive to men are increased responsibilities, and more “technical” tasks to be performed at a higher rate of pay.

D. SUMMARY OF THE CHAPTER

In general then, the data presented in this chapter suggest the following conclusions with respect to the attitudes of boys towards the occupation of male nursing:

- 1) That at the present time, probably not more than about 10 per cent of male students have sufficiently favourable attitudes towards nursing as a career, to seriously consider entering this occupation;
- 2) This small group tends to be comprised of boys who are primarily from working class families, from urban areas, for whom it is less important to have a job that is pleasant, well paid and prestigious, who are not as concerned that

their occupation permit them to be creative and original, but who are more interested in having an occupation which enables them to help people who are in need than are other boys. A larger proportion of the boys in this group also believe that their parents would encourage them in the choice of this occupation.

3) There is a much larger group of boys who might possibly be interested in this occupation and, by comparison with the first group, they tend to be more concerned to have a job with a good income and high prestige and also to place greater emphasis on extrinsic values mediated by a job such as pleasant surroundings and meeting interesting people.

4) Finally, there is a substantial group of boys, which probably comprise about 40 per cent of our sample, who are not interested in this occupation or in any of the other similar occupations, whose principal characteristic is that they involve administering some kind of social service to people in need.

The question remains as to what changes could be made in the definition of the occupational role of male nurse, such that a larger number of boys would consider this occupation and eventually choose it.

With regard to the first group, comprising boys who are already favourably disposed towards nursing, it is suggested that an increase in the availability of information concerning the occupation of male nurse would probably increase the number who would plan to enter this profession.

For the larger group who are somewhat less sure about their attitudes towards nursing, we suggest that a significantly larger number would seriously consider entering this profession if changes were made in the definition of this occupational role, such that boys would perceive this occupation as having much more status for a man than it does at the present time. This may be achieved in at least two ways:

1) by a greater differentiation between the roles of female and male nurse, so that the kinds of tasks performed by men are not the same as those performed by women. Specifically, men prefer a definition of the male nurse role which is seen as having greater responsibility than that for the female nurse, particularly in the sense that the man is not subject to the orders of women. In addition, they would be more favourably inclined towards the job of male nurse if it were seen as involving somewhat more technical kinds of tasks, rather than as requiring men to both exhibit the kinds of interpersonal relation skills and to perform the kinds of services involved in caring for patients, that they regard as more appropriate for women. One specific suggestion that might be offered here is that the title of those in this occupation should be changed from "male nurse" to something like "hospital technician" which, as can be seen from the data presented here, has the effect of appearing more attractive to boys even though no definition was provided them of the kind of duties performed by such a person.

2) by providing a rate of pay and opportunities for advancement that men feel appropriate to a man (for whom an occupation is perhaps seen as being more important than for a woman, both in terms of his perception of what is appropriate for

him as a man and in terms of what he sees as his dependence upon his occupation to fulfil his responsibilities to his future family).

It appears reasonable to us to expect that , if these changes were made, the proportion of boys who would seriously consider becoming male nurses would increase from the present figure of less than 2 per cent to, say, 25 per cent. (It should perhaps be emphasized that it is not suggested that this large proportion would eventually choose this career). However, it should be pointed out that there is a "hard core" of at least 40 per cent of boys for whom this occupation would not become attractive without a much more radical programme than that proposed here.

SUMMARY AND CONCLUSIONS

In this chapter we will summarize the major findings that have been presented in the previous chapters, concerning the sociological factors that affect the supply of nurses. We will then endeavour to identify various groups of potential recruits for the nursing profession, and suggest ways in which such persons might be attracted into nursing, rather than their choosing the occupations they have now selected.

It will be recalled that, at the beginning of this study, we pointed out that the supply of nurses is affected by three classes of events: (1) the career choices of boys and girls, (2) the recruitment and selection policies of schools of nursing and (3) losses from the nursing profession. The present research was concerned only with the first two aspects of the problem, while the third was a subject of a separate research project undertaken by others.

With regard to the question of the career choices of potential recruits into the nursing profession, we also mentioned that the major part of our resources was devoted to a study of factors affecting the choice of nursing by girls, since the vast majority of students in schools of nursing are female. Hence our research dealing with potential male recruits was on a much more limited scale.

A. WHAT KINDS OF GIRLS CHOOSE NURSING AS A CAREER?

Girls may enter the nursing profession through either a hospital school of nursing or a university school of nursing, and it is clear from a comparison of the first year students in these two kinds of schools that the kinds of girls in one are different from the girls in the other. The number of girls who attend hospital schools of nursing is of course much greater than the number at university schools, and we will therefore begin by discussing the former and then indicate the similarities and differences between these girls and those who proceed to university schools of nursing.

To begin with, it was found that a girl's social background characteristics do appear to affect the kind of job she chooses. While it cannot be said that girls with a particular configuration of social background characteristics are likely to enter any specific occupation, it was found, when occupations were classified into groups according to the amount of training required for entry, that the greater the

amount of training required, the greater the likelihood that those who choose such an occupation will be upper class girls with high academic performance, and that the lower the training requirements, the greater the likelihood that the girls who choose it will be lower class girls with low high school grades. Specifically, it was found that the bulk of upper class girls who had high grades at school planned to go to university and to enter high status occupations; the majority of middle class girls with average high school grades anticipate obtaining some vocational training and then entering medium status occupations; and that the bulk of those who do not plan any further education beyond high school were lower class girls with low high school grades.

In terms of the training required for entry, we placed the nursing profession in the medium status category and the social background characteristics of those who choose this occupation are very similar to those who choose all other medium status occupations. Medium status occupations are, of course, much more likely to be chosen by girls from all social classes and of all levels of academic ability, than are high or low status occupations, but nevertheless, the proportion of middle class girls with average high school grades who plan to enter medium status occupations is much greater than for girls with other social background characteristics. So that while girls who choose nursing represent a fairly wide range of social background characteristics, this profession attracts a higher proportion of girls from middle class families, from those who live in medium-size towns and from those who have average high school grades.

It was our opinion that the kinds of objectives or goals a girl has in life affects her evaluation of alternative occupations that she perceives as available to her and hence, these values influence her choice of an occupation. One of the classes of values that we used in an attempt to distinguish between girls choosing different occupations we called "intrinsic-extrinsic" values, of which we conceptualized four: "creativity" – the desire to have a job which permits the person to be creative and original; "self-development" – the desire to have a job for which the person has special abilities and where she can develop and excel; "security" – the desire to have a job which will enable the person to look forward to a stable and secure future; and "self-pleasure" – the desire to have a job which primarily provides enjoyment or pleasure to the individual such as opportunities for travel, enjoyable companionship and working in pleasant surroundings. By "intrinsic values" we mean the desire to have a particular occupation primarily because the work involved in it is interesting and enjoyable; by "extrinsic values" on the other hand, we mean the desire to have a job primarily because it is instrumental in enabling a person to achieve certain objectives rather than because the work is interesting in itself, and the four discreet objectives or values range from intrinsic to extrinsic in the order listed above.

The data show that girls with different social background characteristics have different preferences for these values; that the higher the social class of the girl, the more intrinsic her values and vice versa, and that just as social background characteristics are related to the status of the occupation chosen, so are

the kinds of intrinsic-extrinsic values a girl holds. Specifically, we concluded that girls who want primarily to have an occupation in which they can be creative and original and for which they have special abilities and can develop and excel, choose high status occupations; those who most value self-development and security choose medium status occupations, and girls who value security and self-pleasure above other things choose low status occupations. Girls choosing nursing as a career (a medium status occupation) value "self-development" and "security" more than the other two; in other words, they tend to have objectives which are midway between the intrinsic and extrinsic extremes.

A second class of values was used which were thought to affect the kind of occupation chosen, which were referred to as the "society-family-self" values. By "society-benefiting" values, we mean the desire to have an occupation primarily because it is one in which a person can feel that the work she is doing is of considerable importance to society by directly helping people in need; "family-benefiting" values refer to the desire to have a job primarily because it facilitates or assists a girl in achieving the kind of family she wants; a girl who holds "self-benefiting" values, on the other hand, chooses an occupation primarily because it provides her with opportunities for certain personal pleasures or satisfactions. It was believed that the relative importance of these three objectives would affect a girl's choice of an occupation and, in fact, our data support this view. In Chapter III it was found that the majority of girls who choose nursing as a career place more emphasis on society-benefiting values than on the other two, and this is also the case for girls who plan to enter other occupations which provide direct assistance to persons in need. Not only do those who choose nursing want a job in which they can feel that they are performing work which is important to society, but the vast majority of girls also see nursing as providing an opportunity to do this.

It should also be pointed out that girls choosing nursing who hold different values from the majority of those planning to enter this profession, nevertheless, usually see nursing as an occupation which satisfies their own particular values.

The principal difference between the self-images of girls choosing nursing and those choosing other occupations, is that a much higher proportion of the former see themselves as being able to control their emotions in upsetting situations. In general, those choosing nursing tend to evaluate themselves somewhat more highly than other girls do.

The last of the factors which it was hypothesized would affect a girl's occupational choice is that of the support and influence received by her. The data show that girls who choose nursing are more likely to have received support and encouragement for that choice than other girls are. The source of that support is most likely to be the members of their family. The influence of peers is likely to be more important for those who decide upon nursing at a later age.

Finally, it should be mentioned that when comparing girls with different attitudes towards nursing as a career, we found that the less favourable a girl's attitude toward nursing, the less likely she is to have the characteristics listed above.

Briefly, we can say that the kind of girl who is most likely to select this occupation may be characterized as an "average girl" in almost all respects. Specifically, the girl who is most apt to choose nursing is one who comes from a middle class family, in a medium-size town, who has average high school grades, who wants a job which is appropriate to her abilities and which offers security (the mid-point of the intrinsic-extrinsic value scale), who sees herself as being somewhat more competent than most other girls, and who has received parental encouragement for the choice of nursing. The two characteristics which set her apart from the majority of other girls are: (1) that she places considerably more emphasis than most other girls on having an occupation which is important to society and which helps people in need, and (2) that she sees herself as having the ability to exercise self-control in emotionally upsetting situations.

Turning now to a comparison of girls who enter the nursing profession through university schools of nursing with those who go to hospital schools, it was found that these two groups are the same with respect to the two characteristics which distinguish girls who choose nursing from most other girls, namely, (1) the desire to have a job which is important to society and which helps people in need and (2) the perception of herself as a person who has the ability to exercise self-control in emotionally upsetting situations. However, in all other respects, girls in university schools of nursing are different from girls in hospital schools. The university girls are more like other girls who go to university and choose other jobs than they are like other girls who choose nursing; university nursing students are much more likely to be upper class girls, from urban areas, with higher school grades; they also place more emphasis on the intrinsic values of creativity and self-development than do hospital nursing students.

B. BY WHAT PROCESSES DO GIRLS CHOOSE NURSING AS A CAREER?

In addition to identifying the characteristics of the girls who choose nursing as a career, the temporal patterns involved in the choice of this occupation were examined. We concluded that the consideration or choice of nursing at an early age, as compared to a relatively late age, is an important distinction. Early consideration or choice is the result of a different set of circumstances, and leads to a different kind of decision by the girl concerning her occupational choice, as compared to the case where the consideration or choice is made at a later age.

Generally speaking, it was found that girls choose nursing as a career at an earlier age than girls who select other occupations; some 60 per cent of those who consider entering the nursing profession do so before the age of thirteen. However, of these only 40 per cent retain this choice at the age of seventeen or eighteen, the remaining 60 per cent reject nursing and choose other occupations. Approximately one-half of those who eventually choose nursing have made this choice before the age of thirteen, while about one in five will not have seriously considered any alternative occupation to that of nursing.

In the case of girls who consider the occupation of nursing before the age of thirteen, their initial interest in this occupation is likely to have been stimulated

by members of the family or by relatives who are nurses, who thus provide them with occupational models; in addition, those who choose nursing at an early age receive strong parental approval and encouragement for this occupational choice. One consequence of this early choice of nursing is that these girls tend to have less information about nursing, and such information as they do have is more often provided for them by others rather than to have been solicited by themselves; in other words, those who develop an early commitment to nursing are particularly prone to know less about this occupation, to have taken less trouble to find out about nursing and to be unable to explain why they have chosen it and what they like and dislike about this occupation.

Girls who first consider nursing after the age of thirteen are somewhat less likely to change their minds about entering this occupation than those who consider it at an early age. They are also less likely to have had parents who strongly support and encourage them in their choice of nursing; in fact parental influence and support is of little importance either in stimulating an initial interest in this occupation or in the choice of it as a career. For girls who decide to become nurses at a later age, people and events outside of the family, particularly the influence of peers, are especially important in creating an initial interest in nursing, in providing information about it and in their choice of it as a career. This group also tends to actively solicit information about the nursing profession and obtain this information from a greater variety of sources than girls who make the decision at an early age; hence they know more about nursing and are more able to explain the reasons for their choice.

C. WHAT ATTITUDES DO MEN HAVE TOWARDS BECOMING MALE NURSES?

The number of men who seriously considered this occupation is extremely small, probably about 10 per cent; in fact, almost one boy in five of those who answered our questionnaire was not even aware that there was such an occupation.

Unlike girls, the majority of boys are not particularly interested in having a job which involves administering some kind of social service to people in need; apparently, they do not feel that it is appropriate for men to be concerned with this kind of activity and therefore are not as likely to seek an occupation which is primarily concerned with helping people. Hence, a substantial proportion of boys (about 40 per cent) indicate that they would not be interested in any social service occupation.

On the other hand, there is a small group, which probably amounts to not more than 10 per cent of all boys, who have sufficiently favourable attitudes towards nursing that they would seriously consider becoming male nurses. This group tends to comprise boys who are primarily from working class families, from urban areas, for whom it is less important to have a job that is pleasant, well paid and prestigious, who are not concerned that their job permit them to be creative and original, but who are more interested than other boys are in having an occupation which enables them to help people.

Finally, there is a much larger group of boys who might possibly be interested in this occupation and, in comparison with the last mentioned group, they tend to be more concerned to have a job with a good income and high prestige and also to place greater emphasis on extrinsic values mediated by an occupation such as pleasant surroundings and meeting interesting people.

D. WHAT EFFECTS DO SCHOOLS OF NURSING HAVE ON THE NUMBER AND TYPE OF GIRLS WHO BECOME NURSES?

From our interviews with directors of hospital schools of nursing, it would appear that formal recruitment programmes pursued by these schools do not have a particularly important effect on the number of students applying to schools of nursing at the present time. The majority of the large schools of nursing have a sufficient number of applicants in terms of the number of places available, and therefore do not feel the need for recruitment programmes. Recruitment activities at these schools are usually restricted to supplying literature and speakers when requested to do so. The smaller schools of nursing, on the other hand, devote some efforts to planned recruitment activity, and our data indicate that about one girl in every three attends one of these programmes. However, although some of these girls eventually decide to become nurses, we also found that over one-third of those who attend nursing programmes come away from them with unfavourable reactions and over two-thirds eventually decide not to become nurses.

The effects of the selection procedures employed by schools of nursing on the number and kinds of girls who eventually become nurses also appears to be quite limited. In the first place, almost twenty per cent of the hospital schools of nursing indicate that they do not even have a sufficient number of applicants to fill the places they have available for students and, in these cases therefore, there is little opportunity for the use of selection procedures. Secondly, although approximately 45 per cent of the applications received by hospital schools of nursing are rejected, it is generally agreed that many of them apply to several schools and if they are rejected by one, they are frequently accepted by another; thus, the proportion of those who apply who are eventually unable to enter nursing school is probably relatively low.

Finally, while a small number of applicants are rejected for health reasons, and a similarly small proportion because they are judged to have inappropriate personalities, about 80 per cent of the girls whose applications are rejected are denied admission to schools of nursing because of inadequate academic standing.

With regard to the effects of policies of schools of nursing on the supply of male students, it should be pointed out that less than one-half of one per cent of the approximately 22,000 students in hospital schools at the present time are men. About one school in four has male nursing students, although it is anticipated that this number will continue to increase in the near future. However, the number of male applicants is extremely small and is likely to remain so unless some radical changes are introduced in the role of the male nurse.

E. HOW CAN THE SUPPLY OF NURSES BE INCREASED?

Before we try to answer this question, we will summarize those of our findings that appear to be particularly relevant.

First, generally speaking, girls' attitudes towards the nursing profession are quite favourable; 9 per cent had chosen nursing as a career and were definite in this decision, for another 12 per cent nursing was their first choice, although they were also considering other occupations; a further 11 per cent of the girls indicated a different occupation as their first choice, but were considering nursing as an alternative, and another 25 per cent were not considering nursing at all but said that they would like to become nurses. Thus a total of about 57 per cent of the girls in our sample had favourable attitudes, while 43 per cent said they had never considered nursing and would not like this occupation. Since our sample did not include girls who had already left school before their junior matriculation year, the 57 per cent with favourable attitudes is somewhat higher than we would find in a completely representative sample, but even so, we suspect that the true figure would be about 50 per cent or slightly lower, which still represents a considerably higher proportion than the number who actually go into nursing at the present time. Thus, there is a fairly large reservoir of girls who are favourably disposed towards nursing, but who do not at present become nurses.

It will also be remembered that just over 50 per cent of all girls quite seriously considered nursing as a career at some time in their lives, although 31 per cent eventually rejected this occupation.

Further evidence of the generally favourable view of nursing is obtained if we look at the attitudes of our respondents to various specific characteristics of the profession. Generally speaking, about one-half of the girls indicated that they saw nursing as possessing attractive features such as an adequate income, benefits from the training received, high prestige, the opportunity of meeting congenial and interesting people and so on. On the other hand, with two exceptions, the negative features of nursing were seen by a much smaller number of girls; approximately one-quarter of the sample perceived nursing as having the unattractive characteristics of an inadequate income, a long and difficult period of training, irregular hours and shift work, too much discipline and lack of freedom and as requiring too much self-sacrifice. However, less than 10 per cent said that the inadequate income and self-sacrifice required were important reasons for disliking nursing and less than 15 per cent said the same about the other three negative features. Further, while about 50 per cent saw nursing as involving a lot of hard physical work, only 5 per cent said that this was an important reason for disliking nursing. The characteristic of nursing which is disliked by the greatest number of girls is the fact it involves working in a situation in which one is confronted with emotionally upsetting experiences, such as seeing patients who are sick and injured and also seeing people die. About one-half of the girls react negatively to this aspect of the job of nursing, and for about one-third it is an important reason for disliking this occupation.

Our view that there is a fairly substantial reservoir of girls who are similar to those who choose nursing is also supported by the fact that, according to our data, girls who plan to become nurses are more or less "average" girls in most respects. If an occupation tended to attract girls with unusual characteristics, then the size of the pool of potential recruits would be small; in the case of nursing however, if we assume that the girls who are at present attracted to this occupation are satisfactory recruits then, because they tend in the main not to be girls with unusual characteristics, the number of girls who are potential prospects is much greater.

At the same time however, one must take into account the two characteristics of girls who choose nursing which set them apart from the majority of other girls. The vast majority of girls choosing nursing want to have a job which is important to society and which helps people in need; of all other girls, just under 40 per cent have the same desire. Similarly, only about 28 per cent of the girls who do not choose nursing see themselves as being able to exercise self-control in emotionally upsetting situations – a trait that most nurses see in themselves.

To summarize briefly what has been said up to this point concerning the pool of potential recruits into the nursing profession: first, about one-half of all girls seriously consider becoming a nurse at some time before they reach the age of eighteen; secondly, about one girl out of every two has a favourable attitude towards nursing as a career; thirdly, that the vast majority of girls who plan to become nurses are in most respects "average" girls in the sense that the majority of girls possess similar characteristics; however, the fact that girls who choose nursing are different from the majority of other girls in two respects, does reduce the number who are similar to those planning to become nurses, and this therefore also reduces the number of girls who can be regarded as potential recruits into the nursing profession. If nursing has a particular appeal to girls who want a job which is important to society and helps people in need, then it is important to know that the proportion of those who do not choose nursing at present who desire this kind of occupation, is about 40 per cent; and if a girl is unlikely to choose nursing when she sees herself as being unable to control her emotions, then only about 28 per cent of those not at present planning to become nurses can be seen as potential candidates for this profession. This latter factor appears to have the greatest effect in reducing the number of potential nurses.

So far, we have been identifying the proportions of our sample which have the same characteristics as those possessed by girls choosing nursing, considering each characteristic separately. However, not all of the 28 per cent who perceive themselves as having self-control, also place great importance on society-benefiting values. If it is assumed that it is only when a girl has *all* of these "nursing characteristics" that she can be regarded as a good prospect for the nursing profession, then the pool of such prospects is reduced even further. In fact, while almost two-thirds of the girls who choose nursing possess all of the typical nursing characteristics, (13 per cent of our sample), only another 12 per cent of the sample can be regarded as good prospects for this occupation, in the sense that they also possess *all* of the typical nursing characteristics. However, this would

mean that the pool of potential recruits into the nursing profession is about as large as the group who want to enter this profession at the present time; or to put it another way, if the present definition of the role of a nurse is retained, it seems reasonable to suppose that the number of girls who plan to enter the nursing profession could be doubled.

The next question, of course, is: "How could these girls be attracted to nursing?" To provide some answers to this question, let us examine this group of potential recruits in greater detail.

Almost 60 per cent of these girls are from families of blue collar and farm workers, about one-quarter from white collar families and less than 5 per cent from families of professional men. Over one-half of this group live in towns of 4,000 inhabitants or less or on farms, one-quarter in medium size towns and about 15 per cent in cities. Finally, about one-quarter of this group have grades of 80 per cent or more, almost one-half have grades in the 60 per cent to 80 per cent range while almost one-third have grades less than 60 per cent. As compared with the characteristics of girls who have chosen nursing, a higher proportion of this group tends to come from lower social classes, and to live in small towns; they also appear to include a somewhat higher proportion of girls at the extremes of the range of high school grades, i.e., both those with high and those with low grades, and fewer girls with average grades. The girls who choose nursing tend to come from somewhat higher social classes than these girls but to have somewhat lower high school grades than this group of potential recruits.

The attitude of these girls towards nursing is also different from those who plan to enter this occupation. In the first place, they are both less likely to see attractive features in nursing and more likely to perceive unattractive characteristics in this occupation. Of especial importance is the question of the three-year training period required for those planning to become nurses, which is seen to be attractive by about 20 per cent fewer of this group, while some 10 per cent give this as an important reason for disliking nursing. Since this group of potential nurses includes a substantial number from the lower social classes, the social class was ascertained of the girls who indicated negative attitudes towards the training period; all of these girls came from middle and lower class families, (the bulk of them from the lower class); none was an upper class girl. In addition, on checking high school grades of those who saw the training period as being too long and difficult, we found that the vast majority of these girls have grades of less than 60 per cent.

About one-fifth of this group of potential recruits also indicated that the unpleasant situations involved in caring for the sick and injured was an important reason for disliking nursing.

In general then, it appears that the two principal reasons why these girls who have all of the "appropriate" nursing characteristics, but who nevertheless do not choose nursing as a career, are as follows:

- 1) Some of them, particularly girls from lower class families and those with low high school grades, see the training period as too long and too difficult.

2) Others in this group do not find certain characteristics of nursing as attractive as other girls and therefore the unattractive features, particularly the unpleasant ones associated with caring for the sick and injured, the irregular hours and discipline involved in nursing, become sufficiently important to lead them to reject nursing as a career.

The kinds of jobs that these girls choose are as follows:

Per Cent Choosing Each Occupation:

Medical Occupations:

Therapists	6	
Laboratory and X-ray Technicians	7	
Practical Nursing	8	21

Other Social Service Occupations:

Social Work	9	
Missionary	2	11 32

Other High Status Occupations:

0

Other Medium Status Occupations:

School Teacher	30	
Secretarial Work	10	
Airline Stewardess	3	43

Other Low Status Occupations:

Sales Clerk	1	
Typist and Office Clerk	4	5

It will be seen that about 17 per cent of those who reject nursing choose high status occupations, 15 per cent choose medium status occupations and 13 per cent choose low status occupations. The occupations most frequently chosen by this group are the other medical occupations (21 per cent), social service occupations including the medical occupations (32 per cent) and teaching (30 per cent). It should be noted that the frequency of the choice of medical and social service occupations among this group is more than twice as great as it is among all girls taken together. The frequency of choice of teaching is also somewhat higher than for all other girls, while the choice of low status occupations is lower than for girls generally. This latter point is particularly interesting since lower class girls are over-represented in this group and one would therefore have expected a higher proportion to choose low status occupations than is true for girls as a whole. It appears then that a significant number of girls in this group who possess the typical nursing characteristics, but do not choose nursing, are lower class girls who nevertheless tend to choose somewhat higher status jobs than most girls in their class because they have somewhat higher academic ability.

It seems clear therefore that these girls are good prospects for social service occupations; that they are less enthusiastic about the characteristics of nursing that other girls find attractive and, in addition, are more likely to find other important negative features; further, while some are aiming for higher status occupations than other girls from similar social classes, some others perceive the

training period required to be a barrier to their entry, either because they cannot afford it or because they do not have the ability to succeed in it. It should be pointed out however that if these girls are eventually attracted into nursing, it will mean that they will be principally drawn away from other medical and social service occupations, including teaching.

We would like to reiterate that, among all girls, there is a high degree of consensus in their perceptions both of the role of the nurse and of the kind of girl for whom this occupation is appropriate. Generally speaking, girls who do not choose nursing have the same perceptions of the nursing profession and of nurses as do those who plan to become nurses. Differences in perceptions of the nursing profession and of the appropriate personality for a nurse do not therefore, account for differences in attitude towards this occupation, or for different decisions made with respect to the choice of it. Changing girls' perceptions of nursing or their perceptions of the characteristics of the typical nurse to conform to those held by girls who have chosen nursing will not increase the supply of nurses, since there is already a high degree of consensus with respect to these perceptions. Further, as we have pointed out before, the girls who plan to enter the nursing profession who do have different perceptions from the majority, tend to prefer nursing to have the characteristics they perceive it to have.

We have just examined in detail a group of girls which comprises 12 per cent of our sample, who are regarded as the best prospects for recruitment into the nursing profession. We will now take a closer look at a somewhat larger group of girls who may also be seen as potential recruits. It will be recalled that a set of categories was devised which placed girls along a continuum of attitudes towards the nursing profession from the most unfavourable to the most favourable. The five categories and the proportions of our sample in each are:

Favourable	1. Girls who chose nursing as a career and were definite about this choice	(9%)
	2. Girls whose first choice was nursing, but who were also considering other occupations	(12%)
	3. Girls whose first choice was not nursing, but who were also considering nursing	(11%)
	4. Girls who were not considering nursing as a career, but who said that they would like to become nurses	(25%)
Unfavourable	5. Girls who were not considering nursing and who said they would not like to become nurses	(43%)

Girls in categories 2, 3 and 4, all of whom like nursing, but who have made different decisions about accepting this occupation as a career, can be considered potential recruits. We will therefore now endeavour to identify the kinds of girls in each of these categories and their perceptions of the nursing profession.

First of all, we would remind our readers that social background characteristics do not differentiate very significantly between those girls who chose nursing and those who chose other occupations. The principal effects on the choice

of nursing of the three characteristics of social class, urban/rural residence and high school grades was that girls in categories at both extremes choose nursing less frequently than those in the middle categories. This pattern is fairly typical of all medium status occupations in that those who choose them tend to come from a wide range of social backgrounds; the social background characteristics of those choosing high status and low status occupations, on the other hand, are more likely to be restricted to those in the two extreme social class categories respectively.

From Table 9:1 it will be seen that with regard to disposition towards nursing, the differentiation of the three social background characteristics is again very slight. Generally speaking, the lower the girl's social class and the lower her high school grades, the more favourably disposed she is towards nursing; however, the differences are small and, overall, both those who are favourably and those who are unfavourably disposed towards nursing include girls in all categories of social background characteristics. There is one interesting difference in Table 9:1, which warrants special note. It will be seen that girls from the middle classes are the most likely to be considering nursing at the present time (categories 1, 2 and 3), while girls from rural areas and those from the lower social classes seem most apt to have favourable attitudes, but not to be considering nursing as an occupation for themselves. This suggests that this latter group are more likely than other girls to see barriers to their entry into the nursing profession, such as the cost of the training required and their lack of academic competence for it.

TABLE 9:1
SOCIAL BACKGROUND CHARACTERISTICS OF GIRLS WITH
DIFFERENT ATTITUDES TOWARDS NURSING

Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category with Different Social Background Characteristics:						
		Profes- sional and High Grades	Profes- sional and Low Grades	White Collar and High Grades	White Collar and Low Grades	Rural Blue Collar and Farm and High Grades	Rural Blue Collar and Farm and Low Grades	No Response
Favourable 1 ..	220	1	3	10	13	11	18	44
↑ 2 ..	331	2	4	14	15	10	14	41
3 ..	278	2	1	17	12	16	14	38
↓ 4 ..	634	3	1	13	11	14	21	36
Unfavourable 5 ..	1,081	3	2	16	13	11	16	40
No response	33	6	3	21	6	6	12	46
Per cent of total .	2,577	2	2	15	13	12	17	39

Tables 9:2 and 9:3 indicate that girls who have chosen nursing but who are less definite in this decision, and who are considering alternative occupations (category 2), are less likely to want a job which is important to society and which helps people in need, and somewhat more likely to prefer extrinsic values than girls who are definite in their choice of nursing.

TABLE 9:2

SOCIETY-FAMILY-SELF VALUES HELD BY GIRLS WITH
DIFFERENT ATTITUDES TOWARDS NURSING

Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category Holding Each Value Configuration:			
		Self > Family Society	Family > Self Society	Society > Family Self	No Response
Favourable 1	220	5	19	71	6
↕ 2	331	9	27	57	7
3	278	18	25	50	7
↕ 4	634	20	28	44	8
Unfavourable 5	1,081	29	33	32	7
No response ...	331	33	21	39	6
Per cent of total	2,577	21	29	43	7

TABLE 9:3

INTRINSIC-EXTRINSIC VALUE PATTERNS OF GIRLS WITH
DIFFERENT ATTITUDES TOWARDS NURSING

Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category Holding Values:			
		Intrinsic \longleftrightarrow Extrinsic			No Response
		Creativity and Self- Development	Self-Development and Security	Security and Self-Pleasure	
Favourable 1	220	13	56	25	2
↕ 2	331	12	47	31	2
3	278	22	40	26	2
↕ 4	634	22	35	30	2
Unfavourable 5	1,081	21	33	33	1
No response ..	33	30	33	24	3
Per cent of total	2,577	20	38	30	1

There is also some evidence in Table 9:4 for the view that those girls who are less certain of their choice of nursing see themselves as less competent than girls who are definite about their intention to become nurses. A similar proportion of the former group perceive themselves as being efficient persons and as being able to exercise self-control in emotionally upsetting situations.

The characteristics of the girls in categories 3 and 4 who like nursing, but who have not chosen this occupation, are less like those of the girls who definitely plan to become nurses than girls in category 2. In general, fewer girls in categories 3 and 4 want a job which is important to society and which helps people

in need, more girls have values at the extremes of the intrinsic-extrinsic continuum, and fewer girls perceive themselves as having interpersonal competence and the ability to control their emotions in upsetting situations. In other words, the less favourable a girl's attitude towards nursing, the less she is like girls who choose nursing; the principal differences are with respect to the desire to have a job that is social service in character and the perceptions of herself as being able to control her emotions in upsetting situations.

TABLE 9:4

SELF-IMAGE TRAITS OF GIRLS WITH
DIFFERENT ATTITUDES TOWARDS NURSING

Disposition Towards Nursing		N	Per Cent of Each Disposition Towards Nursing Category Perceiving Themselves as Having:			
			Organizational Competence	Interpersonal Competence	Self- Confidence	Self- Control
Favourable	1....	220	51	56	31	56
	2....	331	38	51	29	44
	3....	278	41	46	27	30
	4....	634	40	49	29	33
Unfavourable	5....	1,081	34	43	28	25
No response	.....	33	18	42	15	24
Per cent of total ...		2,577	38	47	28	33

In Chapter III it was pointed out that, in terms of specific characteristics of nursing, girls with less favourable attitudes towards this occupation are less likely to see its attractive features and more likely to regard certain of its characteristics as unattractive. Specifically, a lower proportion of the girls in categories 3 and 4 anticipate that the kinds of interpersonal relations involved in nursing will be enjoyable to them, while a higher proportion have negative attitudes towards the amount of discipline and lack of freedom involved in nursing and the degree of self-sacrifice required. Finally, about one girl in five in this group says that an important reason for disliking nursing is the atmosphere of sickness and death and the unpleasant duties involved in caring for the sick and injured.

The kinds of occupations chosen by girls in categories 2, 3 and 4 are shown in Table 9:5. (We would point out that girls in category 2 chose nursing and we have therefore indicated the types of jobs these girls gave as their second choice.)

It will be seen that the more favourable a girl's attitude towards nursing, the more likely she is to consider both other medical occupations and other social service occupations as alternatives. Some 22 per cent of the girls who choose nursing, but who are also considering other occupations, are also considering other medical occupations as alternatives, and 32 per cent of them are considering social service occupations including those in the medical field.

TABLE 9:5
OCCUPATIONS CHOSEN BY GIRLS WITH
DIFFERENT ATTITUDES TOWARDS NURSING

Occupation Chosen	Per Cent of Each Disposition Toward Nursing Category Choosing Each Occupation:					
	Favourable ←			→ Unfavourable		Per Cent of Total Sample
	1	2 ¹	3	4	5	
Physiotherapists		5	4	3	1	1
Occupational Therapists		2	1	1	1	1
Laboratory and X-ray Technicians		12	10	9	3	5
Practical Nursing		3	1	5	1	2
Social Worker		9	6	6	4	4
Missionary		1	2	1	1	1
Dietitian		0	3	1	1	1
Actress, Musician, Artist		2	1	3	2	2
Writer or Journalist		2	1	2	3	2
School Teacher		12	31	26	33	24
Stenographer or Private Secretary		12	14	15	18	13
Airline Stewardess		11	7	5	5	4
Sales Clerk		1	1	1	1	1
Typist or Office Clerk		2	3	9	8	6
Beauty Specialist		1	2	2	2	2
Others		10	12	13	15	11
No response		14	0	2	2	2
N	220	231	278	634	1,081	2,577

¹The figures in this column represent the proportion of the girls in this category who gave each occupation as their second choice. Their first choice was nursing.

It is interesting to note that of the girls in category 2 whose first choice is nursing, 12 per cent are also considering teaching as a second choice; of the girls whose first choice is teaching, 14 per cent are also considering nursing as an alternative occupation, which indicates that these two occupations are not seen as alternatives by girls who are most favourably disposed towards nursing. However, among girls who have less favourable dispositions towards nursing, the extent of competition between nursing and teaching is greater. While only 12 per cent of the girls in category 2 whose first choice is nursing have the second choice of teaching, almost 30 per cent of categories 3 and 4 have chosen teaching.

The self-images of girls with different attitudes towards nursing are somewhat different from one another as shown in Table 9:6. The most outstanding difference is the fact that girls with favourable attitudes towards nursing are much more likely to regard themselves as having the ability of self-control than are

girls with unfavourable attitudes. In addition, a higher proportion of girls choosing nursing believe themselves to be efficient persons and to be able to handle inter-personal relations well, than is the case for girls with unfavourable dispositions towards nursing.

TABLE 9:6
SELF-IMAGES OF GIRLS WITH DIFFERENT ATTITUDES TOWARDS NURSING

Disposition Towards Nursing	N	Per Cent of Each Disposition Towards Nursing Category Who Perceive Themselves as Having:			
		Organizational Competence	Interpersonal Competence	Self- Confidence	Self-Control
Favourable	1 220	51	56	31	56
↕	2 331	38	51	29	44
	3 278	41	46	27	30
↕	4 634	40	49	29	33
Unfavourable	5 1,081	34	43	28	25
No response . . .	33	18	42	15	24
Per cent of total	2,577	38	47	28	33

The conclusion just presented, that there is a high degree of interchangeability between nursing and, (1) other medical occupations and (2) other social service occupations, is supported by Table 9:7, which shows the proportions of those choosing various occupations who have favourable attitudes towards nursing.

The highest figures in category 3 occur in the case of the medical and social service occupations. Again, it is interesting to note that in the case of girls who have chosen low status occupations, the number who say they like nursing but who are not in fact considering it (category 4) is far greater than the number who are actually considering it as an alternative occupation.

In concluding this analysis of groups of potential recruits into the nursing profession, we propose to examine in some detail the girls who choose other medical and social service occupations, since as we have seen above, these tend to attract girls who are also favourably disposed towards nursing.

F. OTHER MEDICAL OCCUPATIONS

1. Occupational and Physiotherapists

Girls who choose these occupations tend to be upper class girls with high academic ability who plan to go to university. Like nurses, they place importance on society-benefiting values, but tend to emphasize the intrinsic values of creativity and security more than nurses do. Their self-images are similar to those of nurses except that fewer see themselves as being able to exercise self-control. Their perceptions of the nursing profession include a lower evaluation of girls

TABLE 9:7
ATTITUDES TOWARDS NURSING OF GIRLS
CHOOSING DIFFERENT OCCUPATIONS

Occupation Chosen	N	Per Cent of Girls Choosing Each Occupation in Each Disposition Towards Nursing Category:		
		Favourable \longleftrightarrow Unfavourable		
		3	4	5
Physiotherapists	35	29	51	20
Occupational Therapists	12	33	25	42
Laboratory and X-ray Technicians	122	23	47	28
Practical Nursing	42	10	71	14
Social Worker.....	97	17	36	45
Missionary.....	22	27	27	46
Dietitian.....	27	33	15	48
Actress, Musician, Artist	44	7	39	55
Writer or Journalist.....	41	7	24	66
School Teacher.....	612	14	27	53
Stenographer/Private Secretary	330	12	29	58
Airline Stewardess	100	18	29	52
Sales Clerk	25	12	36	52
Typist or Office Clerk	150	6	37	55
Beauty Specialist.....	40	15	25	60

who become nurses and a greater concern about the discipline and lack of freedom involved in nursing and the irregular hours of work. There are some differences in the perceptions of the nursing profession as between physiotherapists and occupational therapists. The evaluations of nursing given by physiotherapists are much more similar to those of girls choosing nursing, the major difference being that a greater number of the former view the income that nurses receive as being inadequate (some 20 per cent). Occupational therapists on the other hand, do not feel that the income is adequate but many more of this group have negative attitudes towards the emotionally unpleasant aspects of nursing in the care of the sick. About 40 per cent say that the atmosphere of sickness and death and the unpleasant odours and the sight of blood is an important reason for disliking nursing.

2. Laboratory and X-ray Technicians

The social background characteristics of girls choosing these occupations are very similar to those of girls choosing nursing except that the former tend to have higher school grades. Girls planning to become technicians do not place as much emphasis on society-benefiting values as nurses do, while family-benefiting and self-benefiting values are somewhat more important than they are for nurses. They also hold somewhat more extrinsic values than girls choosing nursing. As

with girls planning to become therapists, a smaller number of this group see themselves as being able to exercise self-control. With regard to perceptions of the nursing profession, these girls are less likely to see attractive features in nursing and at the same time, a greater number regard some characteristics of this occupation as important negative features, particularly the inadequate income, the training required, the discipline and lack of freedom, and about 20 per cent of these girls would not become nurses because of the unpleasant emotional experiences involved in this occupation.

3. Practical Nurses

Girls choosing this occupation come from lower social classes and have lower high school grades than girls planning to become registered nurses. However, like other nurses, they place a great importance on society-benefiting values, but tend to hold more extrinsic values than registered nurses. A higher proportion of these girls therefore tend to see nursing as involving too much self-sacrifice. While a substantial proportion of this group see themselves as possessing the ability for self-control, there are still about 20 per cent who feel that the demands placed upon them in this respect, if they were to become registered nurses, would be so great that they could not cope with this occupation. The perceptions of the nursing profession held by these lower class girls are different from those of other girls; a greater proportion are attracted to nursing because of its high prestige, but about one-quarter of them see the training required as an important negative feature; they are also less likely to see other nurses as congenial and some 12 per cent indicate that becoming a registered nurse would interfere with their marriage plans (which is no doubt due to the fact that they anticipate relatively early marriage as lower class girls generally do).

G. OTHER SOCIAL SERVICE OCCUPATIONS

1. Social Worker

Girls choosing this profession come from upper class families, have high school grades and plan to enter university. They are much more likely to seek the intrinsic values of creativity and self-development in their occupation and to be less concerned with job security than nurses. While they see themselves as being able to handle interpersonal relations as well as nurses do, a lower proportion of girls who choose social work think they are able to exercise self-control in emotionally upsetting situations. Their attitudes towards nursing are also quite different from girls who plan to become nurses; as compared to the latter, social workers do not value nursing training as much, tend to see the income and prestige of nurses as inadequate, are more likely to have negative attitudes towards the discipline and lack of freedom and the irregular hours and shift work involved in nursing, and a lower proportion of them feel that they would find other nurses congenial. Significantly, about one-third of those who choose social work would not become nurses because of their dislike of the atmosphere of sickness and death and the unpleasant odours and sight of blood.

2. Missionary

While this group of girls is rather heterogeneous, it appears that they tend to be upper class girls with somewhat higher school grades than is the case for girls choosing nursing. Like nurses, they place great importance on society-benefiting values, but they are more like other upper class girls than nurses with respect to intrinsic-extrinsic values they hold; they tend to place greater emphasis on the intrinsic values of creativity and self-development than nurses do. The principal difference in the self-images of these girls is that a lower proportion see themselves as being able to exercise self-control.

H. OTHER OCCUPATIONS

Generally speaking, girls entering other occupations than those dealt with above appear to find the training they would receive, the congeniality of the people with whom they would come into contact on the job, and the fact that they are helping people in need, less attractive than those choosing nursing do. In addition, about one-third of them say that they would not like the irregular hours that nurses have to work and about 20 per cent give this as an important reason for disliking nursing.

The negative feature of nursing which is cited most frequently is that of the unpleasant situations they would face in caring for the sick; between two-thirds and three-quarters of the girls choosing non-social service occupations indicate that they would not like this aspect of the nursing profession, while about one-third state that this is an important reason for disliking nursing.

In several instances, attitudes towards nursing vary with the status of the girl's occupational choice. By and large, girls choosing low status occupations are more likely to have negative attitudes towards the training period that nurses are required to go through than are girls planning to enter higher status jobs, although both groups find this feature of nursing less attractive than those planning to become nurses. While a smaller proportion of these girls regard the income of nurses as adequate, the extent to which this feature is given as a reason for disliking nursing varies somewhat depending on the status of the occupation chosen by a girl; the higher the status of the occupation chosen, the greater the proportion of girls who see this as an important negative feature. However, only about 5 per cent of the girls stated that this was an important reason for disliking nursing. The prestige of nursing appears also to be related to the status of a girl's occupational choice; excluding those choosing social service occupations, the lower the status of the occupation chosen, the greater the number of girls who indicate satisfaction with the prestige of nursing. Finally, it is interesting to note that the discipline and lack of freedom are seen as negative features of nursing by a greater number of girls choosing both high and low status occupations than is the case for those planning to enter medium status occupations.

One final point before beginning to summarize our conclusions regarding the possibilities of increasing the number of girls who want to become nurses. It occurred to us that we might secure useful information concerning the types of girls

who would be good prospects for the nursing profession if we looked at the girls who had considered nursing in the past and had discarded it in favour of a different occupation. However, as Table 9:10 shows, the kinds of occupations which are eventually chosen by those who reject nursing are much the same as those chosen by girls generally. Earlier in this chapter, we found that girls who *are at present* considering other occupations, as well as nursing, are much more likely to be considering medical and other social service occupations; however, girls who consider becoming a nurse at an early age and eventually change their minds are not more likely to choose one kind of occupation rather than another. This would suggest that the girls who consider nursing when they are young and later reject it are different from girls who eventually plan to become nurses.

I. SUMMARY

It is now time to draw together the main conclusions reached concerning the number of girls who can be regarded as potential recruits into the nursing profession, and the differences and similarities between these and girls who have decided to become nurses.

At the present time, the occupation of nursing appeals to about one girl out of two, and these come from all but the highest social classes with widely different academic abilities. Nursing is also seen as an attractive occupation by girls for whom it is important to have a job that benefits society by helping people in need, and that also involves work that provides opportunities for self-development and security. Further, each of these characteristics is relatively commonly found among girls in our sample, although only about one in three possesses *all* of these characteristics. However, to some extent the favourableness of a girl's attitude towards nursing is affected by her perceptions of her own abilities in relation to the demands that will be made on her by the nursing profession, and this last factor, even more significantly affects the girl's choice of nursing as a career. Specifically, the vast majority of girls see nursing as involving emotionally upsetting experiences in connection with the care of the sick and injured, while only a relatively small percentage see themselves as being able to cope with such situations. Girls who see themselves as having the ability to exercise self-control in such circumstances are more likely to view the occupation of nursing favourably, and this type of girl also much more frequently chooses nursing as a career.

While it is true that some girls who plan to become nurses do not perceive themselves as having this ability of self-control, it is clear that a substantial proportion of those who reject nursing do so because they see this ability as a prerequisite for a successful nurse and, at the same time, think that they do not possess this kind of competence. In our judgment, this is the major deterrent to the choice of nursing among those girls for whom, in most other respects, this occupation would be appropriate and acceptable.

Apart from these two deterrents to the choice of nursing, namely, not wanting a job that is important to society which involves helping people in need, and perceiving oneself as unable to cope with emotionally upsetting situations, which

TABLE 9:8

THE PERCEPTIONS OF NURSING OF GIRLS CHOOSING DIFFERENT OCCUPATIONS

Occupation Chosen		N	Per Cent of Girls Choosing Each Occupation Who Perceive Nursing as Having Each of the Following Characteristics:																				
			Training Useful and Interesting	Adequate Income	Meet Interesting People	Meet Eligible Young Men	Satisfaction from Helping People	High Prestige	Find Nurses Congenial	Nurses Would Give Sense of Security	Provides Travel Opportunities	Training Long and Difficult	Income Inadequate	Dislike Contact with Strangers	Would Interfere with Marriage Plans	Sickness and Death	Unpleasant Odours and the Sight of Blood	Requires Hard Physical Work	Low Prestige	Nurses Not Congenial	Too Much Discipline and Lack of Freedom	Too Much Self-Sacrifice	Irregular Hours and Shift Work
	Physiotherapist.....	35	72	60	86	43	92	63	46	63	26	9	20	0	3	17	66	66	3	3	20	6	31
	Occupational Therapist.....	12	50	58	33	83	50	33	37	17	8	0	0	8	0	42	75	42	0	0	33	17	25
	Lab and X-ray Technician...	122	65	59	66	33	81	60	35	51	32	20	13	13	8	31	62	50	6	4	14	13	31
	Practical Nurse.....	42	81	67	81	31	91	78	43	78	41	22	2	5	12	17	72	72	0	4	7	14	5
	Social Worker.....	97	58	49	67	26	86	49	33	44	23	14	9	2	9	36	57	43	4	3	15	8	19
	Missionary	22	50	60	69	5	86	59	32	41	9	28	0	9	10	32	64	36	5	0	10	14	23
	Dietitian.....	27	63	44	74	44	74	48	33	41	22	4	22	4	0	51	59	59	3	4	26	11	37
	Actress, Musician, Artist ...	44	48	50	66	38	68	48	30	36	19	29	21	4	14	37	66	60	9	7	34	30	25
	Writer or Journalist.....	41	44	46	67	36	56	59	19	34	29	19	29	2	7	39	59	54	7	0	49	24	19
	School Teacher	612	55	48	60	25	68	45	27	42	20	22	11	8	5	50	67	44	2	3	14	14	37
	Steno/Private Secretary.....	330	53	51	63	21	64	58	26	45	23	43	15	7	11	52	69	41	2	3	16	19	39
	Airline Stewardess	100	54	45	69	30	71	56	35	45	30	37	17	7	6	49	70	47	4	5	32	21	32
	Sales Clerk	25	52	80	60	52	76	28	52	12	52	4	4	4	24	52	64	44	4	4	24	28	28
	Typist/Office Clerk	150	61	54	66	29	65	64	29	54	24	46	14	9	16	48	68	41	4	2	19	21	40
	Beauty Specialist	40	48	43	55	33	61	58	20	48	31	58	23	5	18	58	78	53	5	0	33	31	45
Registered Nurse		551	81	66	81	37	95	66	55	60	37	7	8	4	4	6	71	61	2	2	6	7	9
Per cent of total		2,577	62	54	67	29	75	57	35	49	27	23	13	6	8	37	67	51	3	3	16	15	27

TABLE 9:9
THE PERCEPTIONS OF IMPORTANT NEGATIVE CHARACTERISTICS IN NURSING
BY GIRLS CHOOSING DIFFERENT OCCUPATIONS

Occupation Chosen	N	Per Cent of Girls Choosing Each Occupation for Whom Each Negative Characteristic Is an Important Reason for Disliking Nursing:											
		Training Long and Difficult	Income Inadequate	Dislike Contact With Strangers	Would Interfere With Marriage	Sickness and Death	Unpleasant Odours and the Sight of Blood	Requires Hard Physical Work	Low Prestige	Nurses Not Congenial	Too Much Discipline and Lack of Freedom	Too Much Self-Sacrifice	Irregular Hours and Shift Work
Physiotherapist	35	6	6	0	0	11	17	9	0	0	11	3	20
Occupational Therapist	12	0	0	0	0	42	33	0	0	0	8	0	17
Lab and X-ray Technician	122	7	7	4	1	18	19	10	1	0	7	6	10
Practical Nurse	42	10	2	0	2	17	17	5	0	2	0	2	5
Social Worker	97	8	3	0	2	22	26	4	2	1	10	2	10
Missionary	22	14	0	0	5	18	14	0	0	0	5	0	9
Dietitian	27	0	7	0	0	33	15	11	0	0	15	4	22
Actress, Musician, Artist	44	11	7	2	7	21	25	14	2	2	23	9	9
Writer or Journalist	41	2	7	0	0	27	20	15	0	0	22	2	7
School Teacher	612	9	3	3	1	36	37	5	0	1	7	4	17
Steno/Private Secretary	330	23	6	4	6	40	40	8	1	1	7	9	19
Airline Stewardess	100	20	8	4	4	41	39	4	4	2	17	10	19
Sales Clerk	25	8	0	0	8	32	20	4	0	0	16	12	0
Typist/Office Clerk	150	17	3	3	6	35	39	5	1	1	6	6	17
Beauty Specialist	40	28	5	0	5	38	43	10	0	0	13	8	25
Registered Nurse	551	2	2	2	1	2	6	2	0	1	2	2	3
Per cent of total	2,577	10	4	2	3	26	26	6	1	1	8	5	12

TABLE 9:10

PROPORTION OF GIRLS IN EACH OCCUPATION WHO CONSIDERED AND
EVENTUALLY REJECTED NURSING AS A CAREER

Occupation Chosen	Per Cent Considering and Rejecting Nursing	
Physiotherapist.....	2	
Occupational Therapist.....	0	
Lab and X-ray Technician.....	6	
Practical Nurse.....	1	9
Social Worker.....	5	
Missionary.....	1	6
Actress, Musician, Artist.....	3	
Writer or Journalist.....	2	
Dietitian.....	1	6
Teacher.....	28	
Steno/Private Secretary.....	13	
Airline Stewardess.....	5	46
Sales Clerk.....	1	
Typist/Office Clerk.....	7	
Beauty Specialist.....	1	9
Others.....	22	
No response.....	1	23
Total.....	100	100

apply to girls in general, there are other deterrents which are important to some kinds of girls, but not to others. In order to identify these other factors, and the kinds of girls for whom they are important negative influences against the choice of nursing, one must take into account the social background characteristics of the girl, and the status of the occupation she has chosen. We have therefore summarized the attitudes of different groups of girls towards specific characteristics of nursing in Appendix F.

APPENDIX A – QUESTIONNAIRES

- 1. Questionnaire administered to Female High School Students**
- 2. Questionnaire administered to Hospital and University Schools of Nursing**
- 3. Questionnaire administered to Male High School Students**

APPENDIX A (1)

FEMALE HIGH SCHOOL
QUESTIONNAIRE

(1)

(2) (3) (4) (5)

Name

The information we obtain from your answers to these questions will be used in a study undertaken for the Royal Commission on Health Services, which was appointed by the Government of Canada. We are interested in knowing what sorts of things you are looking for in occupations you may work at in the future.

We would like to emphasize that this is *not a test* and your answers will be kept *strictly confidential*. Because of the importance of this study, we would like to make a special point of urging you to do the following.

- 1) Read each question and all of the instructions *very carefully*.
- 2) Seriously consider each question and give answers which accurately reflect your present position.
- 3) *Please answer every question*. While we realize that a few questions may be difficult for you to answer, please choose the response that is closest to the one you would like to give. You can add qualifications in the margin against the question if you wish.
- 4) Circle or mark *clearly* your answer to each question. *Anything enclosed in brackets is only for the tabulation, and should be disregarded*.

Some of you who complete this questionnaire will be asked for an interview in a week or so, so that we can find out a little more about your plans.

May we thank you very much for co-operating in this study.

Please turn to the next page and begin.

DO NOT WRITE IN THIS SPACE – for tabulation only.

- (6) 1 2 3 4 5 6
- (7) 1 2 3
- (8) 1 2 3

Different people look for different things in a career. If you had a completely free choice (that is, if all other considerations were laid aside) what kind of career would you choose? For each of the pairs of job characteristics given below, choose the characteristic which you feel you would prefer in an ideal job. You may like both alternatives, or you may not like either, but pick the one which you would prefer *more* or the one which you would be *more* willing to put up with in a job. Difficult decisions like this are often faced when making job decisions. For example, suppose you had to choose between a job which offered a high income and a job which offered good security. This choice would look like this:

- ① A job which offers a high income
2. A job which offers good security

If you feel that you would prefer a job which pays well, then you would circle the number "1" as above. If you feel that you would prefer a job which offers good security, you would circle the number "2". In this way, go on to the items below.

<p>(9) 1. A job in which I work regular hours and have little responsibility.</p> <p>2. A job in which I work irregular hours and have a lot of responsibility.</p>	<p>(13) 1. A job which I find sometimes gets a little dull and monotonous.</p> <p>2. A job in which I sometimes have to put up with very unpleasant sights and odours.</p>
<p>(10) 1. A job where I work in scientific surroundings.</p> <p>2. A job where I work in business surroundings.</p>	<p>(14) 1. A job which will permit me to be creative and original.</p> <p>2. A job which will enable me to look forward to a stable, secure future.</p>
<p>(11) 1. A job in which I can travel and work in exciting places.</p> <p>2. A job in which I can learn things that will make me a better wife and mother.</p>	<p>(15) 1. A job for which I have special abilities and aptitudes, where I can develop and excel.</p> <p>2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p>
<p>(12) 1. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.</p> <p>2. A job in which I can help people who are faced with human problems or suffering.</p>	<p>(16) 1. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p> <p>2. An occupation which will provide us with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time.</p>

<p>(17) 1. A job in which I can learn things that will make me a better wife and mother.</p> <p>2. A job in which I can help children or adults to be good human beings.</p>	<p>(22) 1. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p> <p>2. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.</p>
<p>(18) 1. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.</p> <p>2. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p>	<p>(23) 1. A job without much prestige which pays well.</p> <p>2. A job in which I can improve my position in society.</p>
<p>(19) 1. A job where I can work in a large city, which I would prefer to do.</p> <p>2. A job where I can work in a small town, which I would prefer to do.</p>	<p>(24) 1. A job in which I can help people who are faced with human problems or suffering.</p> <p>2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p>
<p>(20) 1. An occupation which will provide me with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time.</p> <p>2. An occupation which is very useful to society in general, and in wich I can directly benefit my fellow man.</p>	<p>(25) 1. A job in which I could be looked up to by other people in the community.</p> <p>2. A job in which I meet many pleasant young men, the type I might like to marry.</p>
<p>(21) 1. A job which I can travel and work in exciting places.</p> <p>2. A job which I can help children or adults to be good human beings.</p>	

Rate the following job characteristics in terms of how important you feel they are in choosing an occupation: (Circle the appropriate number for each item.)

	Extremely Important	Important	Only Slightly Important
(26) A job in which I can travel and work in exciting places.....	1	2	3
(27) A job which will permit me to be creative and original	1	2	3
(28) A career in which I can always be sure of finding a job if I need to provide extra money for my future family	1	2	3
(29) A job for which I have special abilities and aptitudes, where I can develop and excel	1	2	3
(30) A job in which I meet interesting clients and work with the kind of people whose company I enjoy	1	2	3
(31) A job in which I would be looked up to by other people in the community	1	2	3
(32) A job in which I can help people who are faced with human problems or suffering	1	2	3
(33) A job which will enable me to look forward to a stable, secure future ..	1	2	3
(34) A job which pays well	1	2	3
(35) A job in which I work in pleasant surroundings	1	2	3
(36) A job in which I am not too closely supervised.....	1	2	3
(37) A job that doesn't interfere with my marriage plans	1	2	3
(38) A job in which I meet many pleasant young men, the type I might like to marry	1	2	3

Some people begin to think about the kind of occupation they want to follow when they are very young. Others delay thinking about it until they are older. Look at the statements below and circle the number beside the one which best describes the way you are thinking about jobs at the present time.

- (39) 1. I am not considering any particular jobs as a possible future career.
2. I am considering three or more jobs as possible future careers.
3. I am considering two jobs as possible future careers.
4. I am only considering one job as a possible future career.

The list below contains some possible jobs which you may be considering. Look at the list and see if any of the jobs you have in mind are there. Then write the code numbers of these jobs in the boxes provided underneath the list, putting the number of the job you think you are most likely to end up in in the first box, the number of the job you think you are next most likely to end up in in the second box, and so on. If you are considering fewer than three jobs, leave the remaining boxes blank. If you are considering more than three jobs, pick the three you think you are most likely to end up in. If an occupation you have chosen does not appear on the list, then write in "XO", for "other".

- 1. School Teacher
- 2. Sales clerk
- 3. Typist or office clerk
- 4. Stenographer or private secretary
- 5. Practical nurse
- 6. Registered nurse
- 7. Laboratory or X-ray technician
- 8. Physiotherapist
- 9. Occupational therapist
- X1. Dietitian
- X2. Social worker
- X3. Factory worker
- X4. Airline stewardess
- X5. Waitress
- X6. Missionary
- X7. Beauty specialist
- X8. Actress, musician, or artist
- X9. Writer or journalist
- X0. Other; please specify:

1

2

3

(40-42)

If you are considering only one specific choice, then circle the number beside the statement below which best describes how definite you feel your decision is. (Skip this question if you are considering more than one occupation.)

- (43)
- 1. My choice is very definite
 - 2. My choice is fairly definite
 - 3. My choice is tentative
 - 4. My choice is very tentative

If you are only considering one specific choice, what was your age at the time you made this decision? (Circle the appropriate number.)

- (44)
- 1. 17 years or older
 - 2. 16 years old
 - 3. 15 years old
 - 4. 14 years old
 - 5. 13 years old or younger
 - 6. Can't remember

What are you going to do after you leave high school, apart from temporary activities during the summer? Circle ONE number only.

- (45)
- 1. Take a job
 - 2. Go to university
 - 3. Get married
 - 4. Enter a special training school, such as nursing, secretarial or vocational school
 - 5. Live with my family and help out at home
 - 6. Do not know

Different occupations offer different kinds of benefits. What kind of benefits do you think the occupation you have chosen offers? For each of the following pairs of alternatives, circle the number beside the one which you think better describes the occupation you have chosen. (If you have not chosen a particular occupation, skip this question.)

<p>(46) 1. A job in which I work regular hours and have little responsibility.</p> <p>2. A job in which I work irregular hours and have a lot of responsibility.</p>	<p>(52) 1. A job for which I have special abilities and aptitudes, where a person can develop and excel.</p> <p>2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p>
<p>(47) 1. A job where I work in scientific surroundings.</p> <p>2. A job where I work in business surroundings.</p>	<p>(53) 1. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p> <p>2. An occupation which will provide me with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time.</p>
<p>(48) 1. A job in which I can travel and work in exciting places.</p> <p>2. A job in which I can learn things that will make me a better wife and mother</p>	<p>(54) 1. A job in which I can learn things that will make me a better wife and mother.</p> <p>2. A job in which I can help children or adults to be good human beings.</p>
<p>(49) 1. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.</p> <p>2. A job in which I can help people who are faced with human problems or suffering.</p>	<p>(55) 1. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.</p> <p>2. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p>
<p>(50) 1. A job which I find sometimes gets a little dull and monotonous.</p> <p>2. A job in which I sometimes have to put up with very unpleasant sights and odours.</p>	<p>(56) 1. A job where I can work in a large city.</p> <p>2. A job where I can work in a small town.</p>
<p>(51) 1. A job which will permit me to be creative and original.</p> <p>2. A job which will enable me to look forward to a stable, secure future.</p>	

(57) 1. An occupation which will provide me with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time. 2. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.	(60) 1. A job without much prestige which pays well. 2. A job in which I can improve my position in society.
	(61) 1. A job in which I can help people who are faced with human problems or suffering. 2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.
(58) 1. A job in which I can travel and work in exciting places. 2. A job in which I can help children or adults to be good human beings.	(62) 1. A job in which I would be looked up to by other people in the community. 2. A job in which I meet many pleasant young men, the type I might like to marry.
(59) 1. A job in which I meet interesting clients and work with the kind of people whose company I enjoy. 2. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.	

Indicate below what kind of a person you are right now. Circle a number "1" ("yes") if the item really describes you, a number "3" ("no") if the item does not describe you, and a number "2" ("?") if you are not sure.

	yes	?	no
(63) At ease when meeting strangers	1	2	3
(64) Very feminine	1	2	3
(65) Very intelligent	1	2	3
(66) Someone to whom others frequently look for help and advice	1	2	3
(67) Dislike taking orders from others	1	2	3
(68) Able to give orders	1	2	3
(69) Always has her life well organized	1	2	3
(70) Like hard work more than most other people do	1	2	3
(71) Has physical strength and endurance	1	2	3
(72) Adaptable and able to do many things well	1	2	3
(73) A person who can control her emotions in upsetting situations	1	2	3
(74) An exceptionally efficient person	1	2	3

The list below mentions a few specific occupations. Have you ever seriously considered any of these at some time during your life but decided not to go into them? If so, write their code numbers in the boxes provided below the list.

1. school teacher
2. hairdresser
3. waitress
4. sales clerk
5. social worker
6. factory worker
7. registered nurse
8. practical nurse
9. private secretary
- X1. airline stewardess
- X2. stenographer
- X3. office worker
- X4. never considered any of these

☐

(75)

☐

(76)

☐

(77)

(78) Among your girl friends here in school, think of the three whom you consider to be your closest friends. How many of these three best friends are planning to enter the same occupation as the one you have chosen?

1. none
2. one
3. two
4. three

Are any of your relatives or close family friends working in the same occupation you have chosen?

(79) 1. No

Yes, and I feel this person is:

2. someone I particularly admire
3. someone I admire no more than most other relatives

In our society some occupations are normally thought of as being more appropriate for men, others as being more appropriate for women. How would you yourself feel about going into an occupation which is mainly filled by men?

(80) 1. would like to very much

2. wouldn't make any difference to me
3. would prefer not to
4. wouldn't consider it at all

[81-85: 2 + I.D.]

Can you remember a specific instance when one of your school teachers said something which led you to believe that you had the ability to enter the occupation you have chosen?

(86) 1. yes

2. no

If you were to decide to become a nurse, how do you think your parents would feel about this? Circle only one number

(87) 1. They would encourage me to become a nurse

2. They would think it was alright

3. They wouldn't care one way or the other

4. They would not particularly like the idea

5. They would be very much opposed

Apart from the occupation you have actually chosen, would you like to become a registered nurse?

(88) 1. yes

2. no

Indicate below the kind of job you think registered nursing is. Circle the letter beside each statement below which you think accurately describes nursing.

- (89) a Requires a long training period which I would prefer not to have to go through.
- (90) b Provides an opportunity for me to go to nursing school and learn interesting and useful things.
- (91) c Doesn't pay well enough.
- (92) d Provides an adequate income.
- (93) e Involves contact with interesting people from vastly different walks of life which I would enjoy.
- (94) f Involves meeting lots of strangers which I don't like very much.
- (95) g Would probably interfere with my marriage plans.
- (96) h Would probably bring me into contact with young men whom I might like to marry.
- (97) i Involves working in an atmosphere of sickness and death which I wouldn't like.
- (98) j Would give me tremendous satisfaction in knowing I am helping people in need.
- (99) k Involves working frequently in situations with unpleasant odours and the sight of blood.
- (100) l Involves a lot of hard physical work.
- (101) m Is one which people generally don't regard very highly.
- (102) n Is one which people generally regard more highly than other occupations for women.
- (103) o Is one in which I wouldn't particularly like other nurses with whom I work.
- (104) p Is one in which I would find other nurses particularly congenial to me.
- (105) q Involves too much discipline and lack of freedom.
- (106) r Requires too much dedication and self-sacrifice.
- (107) s Would involve irregular hours and shift work which I don't like.
- (108) t Would require me to leave home for a long period.
- (109) u Would enable me to move to a large city and travel.
- (110) v Would give me a sense of security by being with others who would help me if I needed it.

If you feel you could not be happy as a nurse, which of the statements listed above are the most important reasons for this? Please go back over the list and make an "X" in front of each statement which you feel is particularly important. For example, if you felt that statement "k" was particularly important, you would mark it to look like this:

X (k) Involves working frequently in situations with unpleasant odours and the sight of blood.

What kinds of benefits do you think *nursing* offers? For each of the following pairs of alternatives, circle the one which you think better describes registered nursing.

<p>(111) 1. A job in which I work regular hours and have little responsibility.</p> <p>2. A job in which I work irregular hours and have a lot of responsibility.</p>	<p>(117) 1. A job for which I have special abilities and aptitudes, where a person can develop and excel.</p> <p>2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p>
<p>(112) 1. A job where I work in scientific surroundings.</p> <p>2. A job where I work in business surroundings.</p>	<p>(118) 1. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p>
<p>(113) 1. A job in which I can travel and work in exciting places.</p> <p>2. A job in which I can learn things that will make me a better wife and mother.</p>	<p>2. An occupation which will provide me with an income and enough free time to dress as I wish, to do what is wish and to go where I wish in my spare time.</p>
<p>(114) 1. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.</p> <p>2. A job in which I can help people who are faced with human problems or suffering.</p>	<p>(119) 1. A job in which I can learn things that will make me a better wife and mother.</p> <p>2. A job in which I can help children or adults to be good human beings.</p>
<p>(115) 1. A job which I find sometimes gets a little dull and monotonous.</p> <p>2. A job in which I sometimes have to put up with very unpleasant sights and odours.</p>	<p>(120) 1. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.</p> <p>2. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p>
<p>(116) 1. A job which will permit me to be creative and original.</p> <p>2. A job which will enable me to look forward to a stable, secure future.</p>	<p>(121) 1. A job where I can work in a large city.</p> <p>2. A job where I can work in a small town.</p>

<div>(122) 1. An occupation which will provide me with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time.</div> <div>2. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.</div>	<div>(125) 1. A job without much prestige which pays well.</div> <div>2. A job in which I can improve my position in society.</div>
	<div>(126) 1. A job in which I can help people who are faced with human problems or suffering.</div> <div>2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</div>
<div>(123) 1. A job in which I can travel and work in exciting places.</div> <div>2. A job in which I can help children or adults to be good human beings.</div>	<div>(127) 1. A job in which I would be looked up to by other people in the community.</div> <div>2. A job in which I meet many pleasant young men, the type I might like to marry.</div>
<div>(124) 1. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</div> <div>2. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.</div>	

What kind of person do you think a registered nurse is? For each of the following statements, circle the number which you think best describes a registered nurse.

	Yes	?	no
(128) At ease when meeting strangers	1	2	3
(129) Very feminine	1	2	3
(130) Very intelligent	1	2	3
(131) Someone to whom others frequently look for help and advice	1	2	3
(132) Dislikes taking orders from others	1	2	3
(133) Able to give orders	1	2	3
(134) Always has her life well organized	1	2	3
(135) Likes hard work more than most other people do	1	2	3
(136) Has physical strength and endurance	1	2	3
(137) Adaptable and able to do many things well	1	2	3
(138) A person who can control her emotions in upsetting situations	1	2	3
(139) An exceptionally efficient person	1	2	3

<p>Is there a club at your school for girls who are planning to become nurses?</p> <p>(140) 1. yes</p> <p>2. no</p>	<p>Are any of your relatives or close family friends medical doctors?</p> <p>(146) 1. yes</p> <p>2. no</p>
<p>(If "yes")</p> <p>Do you belong to this club?</p> <p>(141) 1. yes</p> <p>2. no</p>	<p>Are any of your relatives or close family friends nurses?</p> <p>(147) 1. yes</p> <p>2. no</p>
<p>(If "yes")</p> <p>Do any of your friends belong?</p> <p>(142) 1. yes</p> <p>2. no</p>	<p>Have you ever read a book about someone who was a nurse?</p> <p>(148) 1. yes</p> <p>2. no</p>
<p>Have you attended any special programmes at your school to provide students with information about nursing?</p> <p>(143) 1. No</p> <p>Yes I have, and my general reaction to the program was:</p> <p>2. favourable</p> <p>3. unfavourable</p> <p>4. indifferent</p>	<p>Have you ever talked with your family doctor about nursing?</p> <p>(149) 1. yes</p> <p>2. no</p>
<p>Earlier in this questionnaire you were asked to think of your three best girl friends. How many of those three friends are planning to become <u>nurses</u>?</p> <p>(144) 1. none</p> <p>2. one</p> <p>3. two</p> <p>4. three</p>	<p>Have you ever had to spend some time in a hospital for an operation or illness? Circle only <u>one</u> number.</p> <p>(150) 1. no</p> <p>2. yes, once for less than one week</p> <p>3. yes, once for a week or so</p> <p>4. yes, once for more than one month</p> <p>5. yes, on more than one occasion</p>
<p>Do you have <u>any</u> personal friends who are nurses or nursing students?</p> <p>(145) 1. yes</p> <p>2. no</p>	<p>Where did you live the greatest part of your life?</p> <p>(151) 1. on a farm</p> <p>2. in a town of 4,000 or less</p> <p>3. in a town of 4,000 – 10,000</p> <p>4. in a city of 30,000 – 200,000</p> <p>5. in a city of over 200,000</p> <p>6. in a city of over 500,000</p>

This question refers to the principal earner in your parental family .

(a) What kind of work does he (or she) do?

Please look through the following ten occupational categories and check the one which applies. To help you decide in which class the particular occupation belongs, we have given a number of illustrations of the kinds of occupations which belong in each category. If the one you are looking for is not listed, choose the category which lists occupations which are most like the one that agrees in your case.

- (152) 1. Professional

- Doctor, Dentist, Lawyer, Teacher, Professor, Architect, Draughtsman, University Trained Engineer, Accountant, Social Worker, Clergyman, Journalist.
2. Managerial

- Own business, Bank Manager, Office Manager, Credit Manager, Purchasing Agent, Buyer.
3. Clerical

- Bookkeeper and Cashier, Office Worker, Stock Clerk, Shipping Clerk.
4. Sales Occupations

- Salesman (Insurance, Real Estate, etc.), Sales Clerk, Commercial Traveller.
5. Service Occupations

- Policeman, Mailman, Fireman, Guard, Service Station Attendant, Barber, Waiter, Cook, Porter, Bus or Taxi Driver, Railroad Engineer, Truck Driver.
6. Craftsman

- Bricklayer, Carpenter, Painter, Plumber and other building trades worker, Butcher, Baker, Tailor, Printer, Jeweller and Watchmaker.
7. Skilled Worker

- Toolmaker, Machinist, Sheet Metal Worker, Welder, Metal Worker, Mechanic, Repairman, Electrician, Bulldozer, Crane and other equipment operator, Factory Foreman.
8. Manual Worker

- Logger, Fisherman, Longshoreman, Miner, Labourer.

Agricultural Worker

9. Farm Manager, Independent Farmer
10. Farm Worker, or Labourer

<div>How much formal education did your father receive? (Circle only ONE)</div> <div>(153) 1. completed the eighth grade</div> <div>2. some work in high school</div> <div>3. completed high school</div> <div>4. some college or university work</div> <div>5. special vocational school</div> <div>6. completed college or university</div>	<div>Where was your father born?</div> <div>(154) 1. in Canada</div> <div>2. in Great Britain</div> <div>3. in the U.S.</div> <div>4. in some other European country</div> <div>5. in a non-European country</div>
---	--

<p>Has your mother <u>ever</u> worked at any job other than being a housewife and mother?</p>	<p>Are you affiliated with any religion?</p>
<p>(155) 1. yes 2. no</p>	<p>(158) 1. yes 2. no</p>
<p><u>If yes</u>, look at the list below and circle the number beside the occupation at which she worked <u>for the longest period of time</u>. If this occupation does not appear on the list circle "other".</p>	<p><u>If yes</u>, is this religion:</p>
<p>(156) 1. School teacher 2. Sales clerk 3. Typist or office clerk 4. Stenographer or private secretary 5. Practical nurse 6. Registered nurse 7. Laboratory or X-ray technician 8. Physiotherapist 9. Occupational therapist X1. Dietitian X2. Social worker X3. Factory worker X4. Airline stewardess X5. Waitress X6. Missionary X7. Beauty specialist X8. Actress, musician, or artist X9. Writer or journalist X0. Other, please specify:</p>	<p>(159) 1. Roman Catholic 2. Anglican 3. United Church 4. Presbyterian 5. Jewish 6. Lutheran 7. Baptist 8. Other (Christian) 9. Other (non-Christian)</p>
<p>Where was your mother born?</p>	<p><u>If yes</u>, on the average, how often do you attend the activities of this religion?</p>
<p>(157) 1. in Canada 2. in Great Britain 3. in the U.S. 4. in some other European country 5. in a non-European country</p>	<p>(160) 1. once a week or more 2. about once a month 3. about twice or three times a year 4. never</p>

APPENDIX A (2)

QUESTIONNAIRE

(1)	
(2) (3) (4) (5)	Name
ID number	

The information we obtain from your answers to these questions will be used in a study undertaken for the Royal Commission on Health Services, which was appointed by the Government of Canada.

We would like to emphasize that this is not a test and your answers will be kept strictly confidential. Because of the importance of this study, we would like to make a special point of urging you to do the following.

- 1) Read each question and all of the instructions very carefully.
- 2) Seriously consider each question and give answers which accurately reflect your present position.
- 3) Please answer every question. While we realize that a few questions may be difficult for you to answer, please choose the response that is closest to the one you would like to give. You can add qualifications in the margin against the question if you wish.
- 4) Circle or mark clearly your answer to each question. Anything enclosed in brackets is only for the tabulation, and should be disregarded.

Some of you who complete this questionnaire will be asked for an interview in a week or so, so that we can find out a little more about your plans.

May we thank you very much for co-operating in this study.

Please turn to the next page and begin.

DO NOT WRITE IN THIS SPACE – for tabulation only.

- (6) 1 2 3 4 5 6
- (7) 1 2 3
- (8) 1 2 3

Different people look for different things in a career. If you had a completely free choice (that is, if all other considerations were laid aside) what kind of career would you choose? For each of the pairs of job characteristics given below, choose the characteristic which you feel you would prefer in an ideal job. You may like both alternatives, or you may not like either, but pick the one which you would prefer *more* or the one which you would be more willing to put up with in a job. Difficult decisions like this are often faced when making job decisions. For example, suppose you had to choose between a job which offered a high income and a job which offered good security. This choice would look like this:

- ①. A job which offers a high income
- 2. A job which offers good security

If you feel that you would prefer a job which pays well, then you would circle the number "1", as above. If you feel that you would prefer a job which offers good security, you would circle the number "2". In this way, go on to the items below.

(9) 1. A job in which I work regular hours and have little responsibility. 2. A job in which I work irregular hours and have a lot of responsibility.	(13) 1. A job which I find sometimes gets a little dull and monotonous. 2. A job in which I sometimes have to put up with very unpleasant sights and odours.
(10) 1. A job where I work in scientific surroundings. 2. A job where I work in business surroundings.	(14) 1. A job which will permit me to be creative and original. 2. A job which will enable me to look forward to a stable, secure future.
(11) 1. A job in which I can travel and work in exciting places. 2. A job in which I can learn things that will make me a better wife and mother.	(15) 1. A job for which I have special abilities and aptitudes, where I can develop and excel. 2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.
(12) 1. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life. 2. A job in which I can help people who are faced with human problems or suffering.	(16) 1. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family. 2. An occupation which will provide us with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time.

<p>(17) 1. A job in which I can learn things that will make me a better wife and mother.</p> <p>2. A job in which I can help children or adults to be good human beings.</p>	<p>(22) 1. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p> <p>2. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.</p>
<p>(18) 1. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.</p> <p>2. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p>	<p>(23) 1. A job without much prestige which pays well.</p> <p>2. A job in which I can improve my position in society.</p>
<p>(19) 1. A job where I can work in a large city, which I would prefer to do.</p> <p>2. A job where I can work in a small town, which I would prefer to do.</p>	<p>(24) 1. A job in which I can help people who are faced with human problems or suffering.</p> <p>2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p>
<p>(20) 1. An occupation which will provide me with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time.</p> <p>2. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.</p>	<p>(25) 1. A job in which I could be looked up to by other people in the community.</p> <p>2. A job in which I meet many pleasant young men, the type I might like to marry.</p>
<p>(21) 1. A job in which I can travel and work in exciting places.</p> <p>2. A job in which I can help children or adults to be good human beings.</p>	

Rate the following job characteristics in terms of how important you feel they are in choosing an occupation: (Circle the appropriate number for *each* item.)

	Extremely Important	Important	Only Slightly Important
(26) A job in which I can travel and work in exciting places.	1	2	3
(27) A job which will permit me to be creative and original.	1	2	3
(28) A career in which I can always be sure of finding a job if I need to provide extra money for my future family.	1	2	3
(29) A job for which I have special abilities and aptitudes, where I can develop and excel.	1	2	3
(30) A job in which I meet interesting clients and work with the kind of people whose company I enjoy.	1	2	3
(31) A job in which I would be looked up to by other people in the community.	1	2	3
(32) A job in which I can help people who are faced with human problems or suffering.	1	2	3
(33) A job which will enable me to look forward to a stable, secure future.	1	2	3
(34) A job which pays well.	1	2	3
(35) A job in which I work in pleasant surroundings.	1	2	3
(36) A job in which I am not too closely supervised.	1	2	3
(37) A job which doesn't interfere with my marriage plans.	1	2	3
(38) A job in which I meet many pleasant young men, the type I might like to marry.	1	2	3

What was your age at the time you decided to go into nursing? (Circle the appropriate number.)

- | | | |
|------|----------------------|----------------------------|
| (44) | 1. 17 years or older | 4. 14 years old |
| | 2. 16 years old | 5. 13 years old or younger |
| | 3. 15 years old | 6. Can't remember |

Indicate below what kind of a person you are right now. Circle a number "1" ("yes") if the item really described you, a number "3" ("no") if the item does not describe you, and a number "2" ("?") if you are not sure.

	yes	?	no
(63) At ease when meeting strangers	1	2	3
(64) Very feminine	1	2	3
(65) Very intelligent	1	2	3
(66) Someone to whom others frequently look for help and advice	1	2	3
(67) Dislike taking orders from others	1	2	3
(68) Able to give orders	1	2	3
(69) Always has her life well organized	1	2	3
(70) Likes hard work more than other people do	1	2	3
(71) Has physical strength and endurance	1	2	3
(72) Adaptable and able to do many things well	1	2	3
(73) A person who can control her emotions in upsetting situations	1	2	3
(74) An exceptionally efficient person	1	2	2

The list below mentions a few specific occupations. Have you ever seriously considered any of these at some time during your life but decided not to go into them? If so, write their code numbers in the boxes provided below the list.

*

1. school teacher
2. hairdresser
3. waitress
4. sales clerk
5. social worker
6. factory worker
7. registered nurse
8. practical nurse
9. private secretary
- X1. airline stewardess
- X2. stenographer
- X3. office worker
- X4. never considered any of these

☐

(75)

☐

(76)

☐

(77)

(78) Among the girl friends you had in high school, think of the three whom you considered to be your closest friends. How many of these three best friends were planning to enter nursing?

1. none
2. one
3. two
4. three

In our society some occupations are normally thought of as being more appropriate for men, others as being more appropriate for women. How would you yourself feel about going into an occupation which is mainly filled by men?

- (80) 1. would like to very much
2. wouldn't make any difference to me
3. would prefer not to
4. wouldn't consider it at all

[81-85: 2 + I.D.]

Can you remember a specific instance when one of your school teachers said something which led you to believe that you had the ability to enter nursing?

- (86) 1. yes
2. no

When you decided to become a nurse, how did your parents feel about this? Circle only one number.

- (87) 1. They encouraged me to become a nurse
2. They thought it was alright
3. They didn't care one way or the other
4. They didn't particularly like the idea
5. They were very much opposed

Indicate below the kind of job you think registered nursing is. Circle the letter beside each statement below which you think accurately describes nursing.

- *
(89) a Requires a long training period which I would prefer not to have to go through
(90) b Provides an opportunity for me to go to nursing school and learn interesting and useful things
(91) c Doesn't pay well enough
(92) d Provides an adequate income
(93) e Involves contact with interesting people from vastly different walks of life which I would enjoy
(94) f Involves meeting lots of strangers which I don't like very much
(95) g Would probably interfere with my marriage plans
(96) h Would probably bring me into contact with young men whom I might like to marry
(97) i Involves working in an atmosphere of sickness and death which I wouldn't like
(98) j Would give me tremendous satisfaction in knowing I am helping people in need
(99) k Involves working frequently in situations with unpleasant odours and the sight of blood
(100) l Involves a lot of hard physical work
(101) m Is one which people generally don't regard very highly
(102) n Is one which people generally regard more highly than other occupations for women
(103) o Is one in which I wouldn't particularly like other nurses which whom I work
(104) p Is one in which I would find other nurses particularly congenial to me
(105) q Involves too much discipline and lack of freedom
(106) r Requires too much dedication and self-sacrifice
(107) s Would involve irregular hours and shift work which I don't like
(108) t Would require me to leave home for a long period
(109) u Would enable me to move to a large city and travel
(110) v Would give me a sense of security by being with others who would help me if I needed it
-

What kinds of benefits do you think nursing offers? For each of the following pairs of alternatives, circle the one which you think better describes registered nursing.

<p>(111) 1. A job in which I work regular hours and have little responsibility.</p> <p>2. A job in which I work irregular hours and have a lot of responsibility.</p>	<p>(117) 1. A job for which I have special abilities and aptitudes, where a person can develop and excel.</p> <p>2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.</p>
<p>(112) 1. A job where I work in scientific surroundings.</p> <p>2. A job where I work in business surroundings.</p>	<p>(118) 1. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p> <p>2. An occupation which will provide me with an income and enough free time to dress as I wish, to do what I wish and to go where I wish in my spare time.</p>
<p>(113) 1. A job in which I can travel and work in exciting places.</p> <p>2. A job in which I can learn things that will make me a better wife and mother.</p>	
<p>(114) 1. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.</p> <p>2. A job in which I can help people who are faced with human problems or suffering.</p>	<p>(119) 1. A job in which I can learn things that will make me a better wife and mother.</p> <p>2. A job in which I can help children or adults to be good human beings.</p>
<p>(115) 1. A job which I find sometimes gets a little dull and monotonous.</p> <p>2. A job in which I sometimes have to put up with very unpleasant sights and odours.</p>	<p>(120) 1. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.</p> <p>2. An occupation in which I can always be sure of finding a job if I need to provide extra money for my future family.</p>
<p>(116) 1. A job which will permit me to be creative and original.</p> <p>2. A job which will enable me to look forward to a stable, secure future.</p>	
	<p>(121) 1. A job where I can work in a large city.</p> <p>2. A job where I can work in a small town.</p>

(122) 1. An occupation which will provide me with an income and enough free time to dress as I wish, to do what I wish, and to go where I wish in my spare time. 2. An occupation which is very useful to society in general, and in which I can directly benefit my fellow man.	(125) 1. A job without much prestige which pays well. 2. A job in which I can improve my position in society.
	(126) 1. A job in which I can help people who are faced with human problems or suffering. 2. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.
(123) 1. A job in which I can travel and work in exciting places. 2. A job in which I can help children or adults to be good human beings.	(127) 1. A job in which I would be looked up to by other people in the community. 2. A job in which I meet many pleasant young men, the type I might like to marry.
(124) 1. A job in which I meet interesting clients and work with the kind of people whose company I enjoy. 2. A job in which, if I need to work while my children are growing up, my working hours will not interfere with my family life.	

What kind of person do you think a registered nurse is? For each of the following statements, circle the number which you think best describes a registered nurse.

	Yes	?	No
(128) At ease when meeting strangers	1	2	3
(129) Very Feminine	1	2	3
(130) Very intelligent	1	2	3
(131) Someone to whom others frequently look for help and advice	1	2	3
(132) Dislikes taking orders from others	1	2	3
(133) Able to give orders	1	2	3
(134) Always has her life well organized	1	2	3
(135) Likes hard work more than most other people do	1	2	3
(136) Has physical strength and endurance	1	2	3
(137) Adaptable and able to do many things well	1	2	3
(138) A person who can control her emotions in upsetting situations	1	2	3
(139) An exceptionally efficient person	1	2	3

<p>Was there a club at your school for girls who are planning to become nurses?</p> <p>(140) 1. yes</p> <p>2. no</p>	<p>Are any of your relatives or close family friends nurses?</p> <p>(147) 1. yes</p> <p>2. no</p>
<p>(If "yes")</p> <p>Did you belong to this club?</p> <p>(141) 1. yes</p> <p>2. no</p>	<p>Have you ever read a book about someone who was a nurse?</p> <p>(148) 1. yes</p> <p>2. no</p>
<p>(If "yes")</p> <p>Did any of your friends belong?</p> <p>(142) 1. yes</p> <p>2. no</p>	<p>Have you ever talked with your family doctor about nursing?</p> <p>(149) 1. yes</p> <p>2. no</p>
<p>Did you ever attend any special programmes at your high school to provide students with information about nursing?</p> <p>(143) 1. No.</p> <p>Yes. I did, and my general reaction to the program was:</p> <p>2. favourable</p> <p>3. unfavourable</p> <p>4. indifferent</p>	<p>Have you ever had to spend some time in a hospital for an operation or illness? Circle only <u>one</u> number.</p> <p>(150) 1. no</p> <p>2. yes, once for less than one week</p> <p>3. yes, once for a week or so</p> <p>4. yes, once for more than one month</p> <p>5. yes, on more than one occasion</p>
<p>Are any of your relatives or close family friends medical doctors?</p> <p>(146) 1. yes</p> <p>2. no</p>	<p>Where did you live the greatest part of your life?</p> <p>(151) 1. on a farm</p> <p>2. in a town of 4,000 or less</p> <p>3. in a town of 4,000 – 10,000</p> <p>4. in a city of 30,000 – 200,000</p> <p>5. in a city of over 200,000</p> <p>6. in a city of over 500,000</p>

This question refers to the principal earner in your parental family.

(a) What kind of work does he (or she) do?

Please look through the following ten occupational categories and check the one which applies. To help you decide in which class the particular occupation belongs, we have given a number of illustrations of the kinds of occupations which belong in each category. If the one you are looking for is not listed, choose the category which lists occupations which are most like the one that agrees in your case.

- (152) 1. Professional – Doctor, Dentist, Lawyer, Teacher, Professor, Architect, Draughtsman, University Trained Engineer, Accountant, Social Worker, Clergyman, Journalist.
2. Managerial – Own business, Bank Manager, Office Manager, Credit Manager, Purchasing Agent, Buyer
3. Clerical – Bookkeeper and Cashier, Office Worker, Stock Clerk, Shipping Clerk.
4. Sales Occupations – Salesman (Insurance, Real Estate, etc.), Sales Clerk, Commercial Traveller.
5. Service Occupations – Policeman, Mailman, Fireman, Guard, Service Station Attendant, Barber, Waiter, Cook, Porter, Bus or Taxi Driver, Railroad Engineer, Truck Driver.
6. Craftsman – Bricklayer, Carpenter, Painter, Plumber and other building trades Worker, Butcher, Baker, Tailor, Printer, Jeweller and Watchmaker.
7. Skilled Worker – Toolmaker, Machinist, Sheet Metal Worker, Welder, Metal Worker, Mechanic, Repairman, Electrician, Bulldozer, Crane and other equipment operator, Factory Foreman.
8. Manual Worker – Logger, Fisherman, Longshoreman, Miner, Labourer.

Agricultural Worker

9. Farm Manager, Independent Farmer
10. Farm Worker or Labourer

How much formal education did your father receive? (Circle only ONE)	Where was your father born?
(153) 1. completed the eighth grade	(154) 1. in Canada
2. some work in high school	2. in Great Britain
3. completed high school	3. in the U.S.
4. some college or university work	4. in some other European country
5. special vocational school	5. in a non-European country
6. completed college or university	

Has your mother ever worked at any job other than being a housewife and mother?

(155) 1. yes

2. no

If yes, look at the list below and circle the number beside the occupation at which she worked for the longest period of time. If this occupation does not appear on the list circle "other".

(156) 1. School teacher

2. Sales clerk

3. Typist or office clerk

4. Stenographer or private secretary

5. Practical nurse

6. Registered nurse

7. Laboratory or X-ray technician

8. Physiotherapist

9. Occupational therapist

X1. Dietitian

X2. Social Worker

X3. Factory worker

X4. Airline stewardess

X5. Waitress

X6. Missionary

X7. Beauty specialist

X8. Actress, musician, or artist

X9. Writer or journalist

X0. Other, please specify:

Are you affiliated with any religion?

(158) 1. yes

2. no

If yes, is this religion:

(159) 1. Roman Catholic

2. Anglican

3. United Church

4. Presbyterian

5. Jewish

6. Lutheran

7. Baptist

8. Other (Christian)

9. Other (non-Christian)

If yes, on the average, how often do you attend the activities of this religion?

(160) 1. once a week or more

2. about once a month

3. about twice or three times a year

4. never

Where was your mother born?

(157) 1. in Canada

2. in Great Britain

3. in the U.S.

4. in some other European country

5. in a non-European country

Appendix A (3)

MALE HIGH SCHOOL
QUESTIONNAIRE

Different people look for different things in a career. If you had a completely free choice (that is, if all other considerations were laid aside), what kind of career would you choose? Look at each of the following job characteristics and decide how important it is to you in choosing an occupation. Circle the number ("1" for extremely important, "2" for important, and "3" for only slightly important) which best describes the way you feel.

	Extremely Important	Important	Only Slightly Important
1. A job in which I can travel and work in exciting places.	1	2	3
2. A job which will permit me to be creative and original.	1	2	3
3. A job with an income which will allow me to provide my future family with the extra things we would like.	1	2	3
4. A job for which I have special abilities and aptitudes, where I can develop and excel.	1	2	3
5. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.	1	2	3
6. A job in which I would be looked up to by other people in the community.	1	2	3
7. A job in which I can help people who are faced with human problems and suffering.	1	2	3
8. A job which will enable me to look forward to a stable, secure future.	1	2	3
9. A job which pays well.	1	2	3
10. A job in which I work in pleasant surroundings.	1	2	3
11. A job in which I am not too closely supervised.	1	2	3

Suppose you were offered a job where you had to follow directions given by a woman. How would you feel about this?

- ☐ wouldn't mind it at all
- ☐ would prefer not to
- ☐ would never consider such a job

If you were to go into military service would you be interested in being a medical corpsman?

- ☐ yes, very much interested
- ☐ might consider it as a possibility
- ☐ would prefer other military specialities
- ☐ no, would never consider being a medical corpsman at all

How do you feel when you are around someone who is sick or injured? (Check as many as apply)

- ☐ uncomfortable
- ☐ enjoy trying to help them
- ☐ helpless
- ☐ I try to avoid being in their presence
- ☐ I feel better if a woman is present to care for them

If you had the ability and the financial resources to get the training, would you like to become a doctor?

- ☐ yes, I think it would be very rewarding
- ☐ yes, because they make lots of money and have high prestige
- ☐ no, I do not have the personality for that kind of work
- ☐ no, I would prefer going into some other career

How would you feel about working as an ambulance driver?

- ☐ I think I would enjoy it
- ☐ I wouldn't like working with sick and injured people
- ☐ The job has low status and doesn't pay well enough

If you could afford the training necessary, would you ever consider becoming a hospital technician?

- ☐ yes
- ☐ no

If "yes", what would you like most about the job?

Would you ever consider becoming a social worker?

- ☐ no, I don't care for a job working that closely with human problems and suffering
- ☐ no, it doesn't pay well and has low prestige

____ no, that kind of job is for women

____ yes, I would enjoy being a social worker

Would you ever consider becoming a male nurse?

____ no, I don't care for a job working that closely with human problems and suffering

____ no, it doesn't pay well and has low prestige

____ no, that kind of job is for women

____ yes, I would enjoy being a male nurse

Did you know that some men work in hospitals as male nurses?

____ yes

____ no

If you were to become a doctor, which of the following types of practices would you prefer to specialize in?

____ general practice, caring for the ill and injuries of the people in my community

____ surgery, specializing in difficult and delicate operations

____ research, working to advance the frontiers of scientific knowledge

____ ophthalmology, specializing in problems of vision and eye ailments

What kind of jobs do you think a male nurse does in a hospital?

Have you ever considered becoming a male nurse?

____ yes

____ no

If "yes", how seriously have you considered it?

____ very seriously

____ casually

____ seriously

____ very casually

Have you ever read or heard anything which provided you with information on the occupation of male nurse?

____ yes

____ no

If "yes", where did you come across this information?

If you were to decide to become a male nurse, how do you think your parents would feel about this?

____ they would encourage me to become a nurse

- ☐ they would think it was all right
- ☐ they wouldn't care one way or the other
- ☐ they would not particularly like the idea
- ☐ they would be very much opposed

Do you think that men who go into male nursing are different from men who go into other occupations?

- ☐ yes ☐ no

If "yes", in what do you think they are different?

What kind of a job do you think registered nursing is for men? Place a check beside each statement below which you think accurately describes the occupation of male nurse.

- ☐ Requires a long period of training which I would prefer not to have to go through.
- ☐ Doesn't pay well enough.
- ☐ Provides an adequate income.
- ☐ Offers security and the assurance of being able to find a job
- ☐ Involves working in an atmosphere of sickness and death which I wouldn't like.
- ☐ Would give me tremendous satisfaction in knowing I am helping people in need.
- ☐ Involves working frequently in situations with unpleasant odours and the sight of blood, which I would prefer to avoid.
- ☐ Is one which people generally don't regard very highly.
- ☐ Involves too much discipline and lack of freedom.
- ☐ Requires too much dedication and self-sacrifice.
- ☐ Would involve irregular hours and shift work which I don't like.
- ☐ Involves following orders given by doctors, instead of making decisions yourself.
- ☐ Involves following orders given by head nurses, who are usually women.
- ☐ People generally think of that kind of work as being for women, and I would feel like a sissy going into it.

Which of the above statements are the most important reasons why you would not like to go into registered nursing? Go back and make a star (*) beside the particularly important statements.

If you yourself would not like to become a nurse, aside from the list you have just looked at, write below any other important reason for this.

The role of the nurse in the hospital is undergoing some changes. It is possible that in the future more changes may take place, leading to new positions and greater specialization. Some possible changes are outlined below. If any of these changes might lead to a position which you would consider going into, make a check in the space provided.

- ☐ a position as surgical technician, with greater responsibility assisting in the operating room.
- ☐ better pay for registered nurses.
- ☐ special administrative positions, coordinating nursing care.
- ☐ positions in which the more menial tasks of nursing were handled by subordinates.
- ☐ position in which I had special responsibilities for male patients.
- ☐ none of these changes would make any difference to me.

Do you feel that helping people, in the way in which nurses do, is something women are better at than men?

☐ yes ☐ no

With the increasing complexity of modern hospitals, one new position which is being considered is that of "hospital technician". This occupation would be designed for men with training in certain medical techniques and the ability to work with doctors in the care of patients. The training would be less than that required of doctors. A hospital technician would take care of hospital duties for which the normal nursing staff is not well suited.

Do you think you would be interested in becoming a hospital technician?

☐ yes ☐ possibly ☐ no

If you would not be interested, what are the main reasons why you would not be interested?

This question refers to the principal earner in your parental family.

What kind of work does he (or she) do?

Where does he (or she) work?

Does he (or she) work:

- ☐ for the government
- ☐ for private employer
- ☐ in own business

APPENDIX B – CHARACTERISTICS OF SAMPLE

1. Socio-economic Characteristics of Sample of Female High School Students

TABLE B:1
HIGH SCHOOL GRADES

	90-99%	80-89%	70-79%	60-69%	50-59%	Less than 50%	No Response
% of Total	5	13	17	12	15	4	33
% of those Responding:	7	19	26	18	23	6	

TABLE B:2
RURAL/URBAN RESIDENCE

	Cities over 200,000	Cities & Towns between 4,000 - 200,000	Town less than 4,000	Farms not in Towns	No Response
% of Total	24	26	21	25	4

TABLE B:3
GEOGRAPHIC REGION

	Quebec	Atlantic	Prairies	Ontario	B. C.	Unclassified
% of Total	25	9	18	36	8	5

TABLE B:4
RELIGION

	Roman Catholic regular attendance	Protestant regular attendance	Protestant infrequent attendance	All else
% of Total	33	37	20	10

TABLE B:5
SOCIAL CLASS OF PARENTS

	Professional	White Collar	Blue Collar and Farm	No Response
% of Total	7	32	51	10

TABLE B:6
NATIONAL ORIGIN OF FATHER

	Canada	Great Britain	United States	Other European countries	Non-European countries	No Response
% of Total	81.0	6.6	2.6	6.2	.9	2.7

APPENDIX C – CHAPTER II

- 1. Method used to determine Status of Occupations chosen**
- 2. Interrelationships between Socio-economic Characteristics**
- 3. Relationship between ‘‘ C-R-G’’ Index and Choice of Occupation**

1. Method used to determine status of occupation chosen

Our measure of social class utilized a combination of father's occupation and educational level attained by father, from which we obtained nine social classes. The proportion of the students in each of the nine social classes planning to enter each of the nineteen occupational categories we used is shown in Table C : 1. On inspection of this table, we found that there were noticeable similarities between groups of occupations in terms of the proportions of each social class planning to enter them. We further noticed that the groupings roughly coincided with the educational requirements of the various occupations, which are also related to the status of the occupation. Therefore, we grouped the nineteen occupational classes into three status classes based upon the educational standard of the entrance requirements for the occupation as follows :

1) *High status occupations* (requiring university training): physiotherapist occupational therapist, dietitian, social worker, actress, musician, artist, writer, journalist, missionary.

2) *Medium status occupations* (requiring some vocational training beyond high school): school teacher,¹ stenographer, private secretary, registered nurse,² laboratory technician, X-ray technician, airline stewardess.

3) *Low status occupations* (requiring no formal training): sales clerk, typist, office clerk, practical nurse, factory worker, waitress, beauty specialist.

Table C:2 shows the proportion of students in each social class planning to enter each of the three classes of occupation.

Taking each of the three occupational status classes in turn, we see that the social classes having a higher proportion of students than the average who are planning to enter each class of occupation are as follows :

- High status occupations: the five highest social classes
- Medium status occupations: the six lowest social classes
- Low status occupations: the three lowest social classes

The patterns of occupational choice based on the status of the job are clearly different for girls of different social classes. Of those coming from families of professional men with a university education (Social Class 1), almost one-half plan to enter high status occupations also requiring a university education, while the proportion of daughters of unskilled workers (Social Class 9) is only four per cent; thus the chances of a girl from a family of a professional man planning to enter a high status occupation is almost twelve times as great as for a girl whose father is an unskilled worker, and about three times as great as for a girl whose father has a managerial or clerical job. On the other hand, twenty-one per cent of girls with fathers in unskilled occupations anticipate having low status occupations as compared with only four per cent of girls of professional men.

¹ School teacher is included in the middle status group even though many teachers go through university, because in many areas of Canada it is still possible to become a teacher without any formal university training and this of course affects the status image of this occupation.

² It should be pointed out that some nurses go to university schools of nursing. However, the proportion of the total number of student nurses in university schools of nursing in 1960 was very small (1,096 out of 21,297, or 5.1 per cent).

TABLE C:1

Social Class	School Teacher	Sales Clerk	Typist Off. Clerk	Steno/Private Secretary	Pract'l Nurse	Reg'd Nurse	Lab or X-ray Techn.	Physio-therapist	Occup'l Therapist	Dietitian	Social Worker
1. Professional (with univ. educ'n)	14.6	.0	.6	4.7	1.8	20.5	1.2	5.3	1.2	.0	7.6
2. Professional (without univ. educ'n)	30.6	.5	3.8	9.3	.0	17.5	3.8	2.2	.5	1.6	2.2
3. Managerial (with more than high school)	19.8	.0	3.1	11.5	.0	16.7	5.2	1.0	.0	5.2	4.2
4. Managerial (with high school or less)	21.3	.3	4.5	11.8	.3	25.8	5.9	2.4	.7	2.1	5.2
5. Clerical and sales (with at least high school degree)....	17.4	1.5	4.5	6.8	.0	29.5	8.3	2.3	.8	.8	2.3
6. Clerical and sales (with less than high school degree)	25.4	1.4	8.0	14.5	.7	21.0	2.2	.0	.7	1.4	4.3
7. Service, occup'ns, craftsmen and skilled workers.....	22.3	1.0	6.5	16.0	1.0	20.0	6.5	1.3	.2	1.0	3.9
8. Independent farmers	25.1	1.9	7.7	15.9	3.2	21.9	3.0	.4	.6	.4	3.6
9. Unskilled workers (farm and non-farm)	30.6	.8	9.5	12.4	5.4	17.8	5.4	.0	.0	.4	.4
10.No response	26.3	.8	4.0	11.6	1.2	23.5	4.0	.4	.4	.4	4.0

TABLE C:1 (Concluded)

Social Class	Factory Worker	Airline Stewardess	Waitress	Missionary	Beauty Specialist	Actress, Musician, Artist	Writer or Journalist	Other	No Job Choice
1. Professional (with univ. educ'n) .....	.0	2.9	.0	.0	.0	3.5	6.4	25.1	4.7
2. Professional (without univ. educ'n) .....	.0	2.2	.0	2.2	2.7	2.2	2.7	14.8	1.1
3. Managerial (with more than high school) .....	.0	5.2	.0	1.0	2.1	3.1	3.1	15.6	3.1
4. Managerial (with high school or less) .....	.0	2.8	.0	1.0	1.0	1.0	1.4	10.8	1.4
5. Clerical and sales (with at least high school degree) ....	.0	6.1	.0	.8	.0	3.8	.0	13.6	1.5
6. Clerical and sales (with less than high school degree) .....	.0	5.8	.0	1.4	1.4	1.4	1.4	6.5	2.2
7. Service, occup'ns, craftsmen and skilled workers .....	.0	3.8	.0	1.0	1.6	1.5	.7	11.1	.7
8. Independent farmers .....	.0	4.1	.0	.4	2.4	.6	1.3	6.7	.6
9. Unskilled workers (farm and non-farm) .....	.4	3.7	.0	.8	2.5	.4	.8	6.6	2.1
10.No response .....	.0	4.4	.0	.4	.4	3.2	1.6	11.6	2.0

TABLE C:2
RELATIONSHIP BETWEEN SOCIAL CLASS
OF PARENTS AND STATUS OF OCCUPATION CHOSEN

	N	Percentage of Each Social Class Choosing:				
		High Status	Medium Status	Low Status	No Job Chosen	Total
1. Productional (with university education)	171	47	45	4	5	100
2. Professional (without university education)	83	18	66	13	3	100
3. Managerial (with more than high school)	96	28	62	5	5	100
4. Managerial (with high school or less)	287	20	70	8	2	100
5. Clerical and sales (with at least high school degree)	132	17	72	8	2	100
6. Clerical and sales (with less than high school degree)	138	13	70	13	4	100
7. Service, occupation, craftsmen and skilled workers	611	14	71	14	2	100
8. Independent farmers	466	9	72	18	1	100
9. Unskilled workers (farm and non-farm)	242	4	72	21	3	100
10.No response	251	15	71	12	2	100
Per cent of total	2,577	16	69	13	3	100

$X^2 = 216.2 : d.f. = 16 : P < .001$

Some explanation should be given for the considerable difference in the pattern of occupational choice of Class 2 girls (daughters of professional fathers without university education) with that of Class 1 girls. The pattern of occupational choice for this group is much more like those for Classes 4, 5 and 6 than it is with either 1 or 3, even though the fathers of these girls were given as professional men. It should be pointed out that in the DBS classification that we used on our questionnaire, girls whose fathers' occupation was "Accountant", for example, are required to check the category "professional". However, since a bookkeeper could often have been confused with an accountant by our respondents, when we take out those professional men who received a university education (Class 1), it is probable that the remainder are more like the lower status managerial and clerical occupations and this probably accounts for the greater similarity of Class 2 with Classes 4, 5 and 6 than with Class 1.

If we group the nine social classes into three which roughly correspond to: 1) the professions, 2) white collar occupations, and 3) blue collar and farm occupations, we obtain the patterns of occupational choice shown in Table 2:1 in Chapter II.

2. Interrelationships between socio-economic characteristics

TABLE C:3
URBAN/RURAL RESIDENCE AND SOCIAL CLASS

Social Class	N	Urban/Rural Residence:				
		Cities Over 200,000	Cities and Towns Between 4,000 - 200,000	Towns Less Than 4,000	Farms Not in Towns	No Res- ponse
		%	%	%	%	%
Professional	171	66	21	9	1	4
White Collar	836	40	31	21	6	2
Blue Collar and Farm ...	1,319	11	23	22	41	3
No response	251	14	26	25	17	18
Per cent of total...	2,577	24	26	21	25	4

$\chi^2 = 613.9$ d.f. = 12: $P < .001$

TABLE C:4
HIGH SCHOOL GRADES AND URBAN/RURAL RESIDENCE

Residence Rural/Urban	N	High School Grades:						No Response
		90-99%	80-89%	70-79%	60-69%	50-59%	Less than 50%	
Cities over 200,000	630	% 8	% 14	% 23	% 12	% 13	% 2	% 29
Cities and Towns between 4,000 - 200,000.....	659	5	16	19	12	19	2	27
Towns less than 4,000	542	4	13	16	13	11	6	38
Farms not in Towns	636	5	9	11	13	19	8	35
No response.....	110	1	10	16	13	4	5	54
Per cent of total.....	2,577	5	13	17	12	15	4	33

$\chi^2 = 102.6$; d.f. = 24; $P < .001$

TABLE C:5
HIGH SCHOOL GRADES AND SOCIAL CLASS

Social Class	N	High School Grades:					Less than 50%	No Response
		90-99%	80-89%	70-79%	60-69%	50-59%		
Professional.....	171	% 11	% 12	% 14	% 17	% 12	% 4	% 32
White Collar.....	836	5	12	21	12	15	4	32
Blue Collar and Farm.....	1,319	5	13	15	12	18	5	33
No response.....	251	4	14	18	14	7	4	40
Per cent of Total	2,577	5	13	17	12	15	4	33

$\chi^2 = 34.3$; d.f. = 18; .01 $P < .02$

TABLE C:6
RELIGION AND SOCIAL CLASS

Social Class	N	Religion:			
		Roman Catholic Regular Attenders	Protestant Attenders Irregular	Protestant Infrequent Attenders	All Else
		%	%	%	%
Professional.....	171	5	52	31	13
White Collar	836	29	41	23	8
Blue Collar and Farm	1,319	37	36	19	8
No response	251	44	22	11	24
Per cent of total	2,577	33	37	20	10

$\chi^2 = 80.3$: d.f. = 9: $P < .001$

TABLE C:7
RELIGION AND HIGH SCHOOL GRADES

High School Grades	N	Religion:			
		Roman Catholic Regular Attenders	Protestant Regular Attenders	Protestant Infrequent Attenders	All Else
		%	%	%	%
90 - 99%	132	24	46	24	7
80 - 89%	330	59	22	12	7
70 - 79%	440	39	32	22	7
60 - 69%	319	28	40	24	9
50 - 59%	393	13	50	25	12
Less than 50%.....	111	11	58	21	11
No response.....	852	35	35	18	13
Per cent of total	2,577	33	37	20	10

$\chi^2 = 217.3$: d.f. = 18: $P < .001$

TABLE C:8
RELIGION AND URBAN/RURAL RESIDENCE

Urban/Rural Residence	N	Religion:			
		Roman Catholic Regular Attenders	Protestant Regular Attenders	Protestant Infrequent Attenders	All Else and No Response
		%	%	%	%
Cities over 200,000	630	17	41	29	13
Cities and Towns between 4,000 – 200,000	659	44	36	15	5
Towns under 4,000	542	43	36	14	7
Farms not in Towns	636	30	37	23	10
No response	110	32	26	9	33
Per cent of total	2,577	33	37	20	10

$X^2 = 140.0$; d.f. = 12; $P < .001$

TABLE C:9
GEOGRAPHIC REGION AND SOCIAL CLASS

Social Class	N	Geographic Region:					Unclassified and No Response
		Quebec	Atlantic	Prairies	Ontario	B. C.	
		%	%	%	%	%	%
Professional	171	4	4	29	44	14	5
White Collar	836	23	8	20	34	12	4
Blue Collar and Farm	1,319	26	11	15	38	5	5
No response	251	40	10	19	24	6	2
Per cent of total	2,577	25	9	18	36	8	5

$X^2 = 99.2$; d.f. = 15; $P < .001$

TABLE C:10
GEOGRAPHIC REGION AND HIGH SCHOOL GRADES

High School Grades	N	Geographic Region:					
		Quebec	Atlantic	Prairies	Ontario	B.C.	Unclassified
		%	%	%	%	%	%
90 – 99%.....	132	20	8	20	39	6	8
80 – 89%.....	330	53	7	6	20	9	5
70 – 79%.....	440	35	8	10	30	14	4
60 – 69%.....	319	18	11	15	36	15	5
50 – 59%.....	393	2	8	24	47	5	15
Less than 50%	111	0	7	40	28	23	2
No response	852	26	12	22	40	1	0
Per cent of total	2,577	25	9	18	36	8	5

$x^2 = 423.3$; d.f. = 30; $P > .001$

TABLE C:11
GEOGRAPHIC REGION AND URBAN/RURAL RESIDENCE

Urban/Rural Residence	N	Geographic Region:					
		Quebec	Atlantic	Prairies	Ontario	B.C.	Unclassified
		%	%	%	%	%	%
Cities over 200,000.....	630	14	1	26	44	14	1
Cities and Towns between 4,000 – 200,000.....	659	36	10	16	16	9	13
Towns over 4,000	542	30	15	12	35	7	1
Farms not in Towns	636	18	12	14	51	2	3
No response	110	37	9	35	16	0	3
Per cent of total	2,577	25	9	18	36	8	5

$X^2 = 368.7$; d.f. = 20; $P < .001$

TABLE C:12
GEOGRAPHIC REGION AND RELIGION

Religion	N	Geographic Region:					
		Quebec	Atlantic	Prairies	Ontario	B. C.	Unclassified
		%	%	%	%	%	%
Roman Catholic Regular Attenders	847	71	11	5	10	2	1
Protestant Regular Attenders	959	1	12	27	44	7	9
Protestant Infrequent Attenders	517	1	5	18	53	19	3
All Else	254	11	2	22	54	9	2
Per cent of total	2,577	25	9	18	36	8	5

$X^2 = 1,458.4$; d.f. = 15; $P < .001$

TABLE C:13
GEOGRAPHIC REGION, SOCIAL CLASS AND RELIGION

"C-R-G" Class	Religion	N	Geographic Region:					B. C.	Unclassified
			Quebec	Atlantic	Prairies	Ontario			
White Collar and High Grades Urban Blue Collar and High Grades	Protestant Regular Attenders	119	% 2	% 5	% 24	% 40	% 18	% 13	
	Protestant Infrequent Attenders	83	0	5	13	33	47	2	
	Roman Catholic	155	87	5	0	6	1	1	
White Collar and Low Grades Urban Blue Collar and Medium Grades	Protestant Regular Attenders	156	1	10	28	46	6	10	
	Protestant Infrequent Attenders	79	0	1	20	39	32	8	
	Roman Catholic	67	63	6	8	9	10	5	
Rural Blue Collar and Farm and High Grades	Protestant Regular Attenders	85	2	22	11	52	5	8	
	Protestant Infrequent Attenders	45	0	4	9	80	7	0	
	Roman Catholic	167	80	10	1	7	1	1	
Rural Blue Collar and Farm and Low Grades	Protestant Regular Attenders	201	0	8	30	38	8	17	
	Protestant Infrequent Attenders	98	0	5	13	64	10	7	
	Roman Catholic	85	32	28	9	20	5	6	
No response		1,237	24	10	21	39	5	2	
Per cent of total		2,577	25	9	18	36	8	5	

$\chi^2 = 1,161.6$: d.f. = 60: $P < .001$

3. Relationship between "C-R-G" Index and Choice of Occupation

The girls in our sample were asked to indicate the job that they thought "they were most likely to end up in", the next most likely and the third most likely job. The extent to which occupational aspirations are affected by the three social background factors discussed above, is confirmed by the second and third occupational choices as shown in Table C: 14.

As with first choices, the occupations chosen by girls in the top "C-R-G" class as being the second most likely ones they will enter are much more frequently in the high status group occupations than the case for "C-R-G" Class number 6, and the reduction in the percentage is consistent as one proceeds from Class 1 to Class 6. The reverse is true of low status occupations where these are the second choices of only 2 per cent of Class 1, while 24 per cent of Class 6 draw their second choices from these occupations. Again, there is a consistent increase in the percentages as we proceed from Class 1 to Class 6.

Information was obtained from each girl as to how definite or tentative her first choice of occupation was. Table C:15 presents these data based on "C-R-G" class of the respondent and it will be seen that a substantially lower proportion of upper class girls with high school grades are definite about their choice of an occupation than is the case for other girls. This also results in their having a higher proportion of second choices (Table C: 14).

We also asked each respondent to indicate the jobs they had considered seriously and finally decided not to enter. Table C:16 shows the proportion of each of the six "C-R-G" categories discarding each of the three status types of occupation.

Again, we find a picture that is consistent with the others presented in this section. Not only are the first, second and third choices of "C-R-G" Class 1 girls much more likely to be high status occupations than they are for girls from Class 6, but this is also the case for those occupations which have been seriously considered and discarded in favour of another. Similarly, like first, second and third occupational choices, the kinds of occupations which Class 6 girls consider early and reject are much more frequently low status jobs than is the case for Class 1 girls. Finally, the fact that on the average Class 6 girls seem to consider and reject about 33 per cent more choices (2.0 as compared to 1.5) than girls in Class 1, is consistent with our previous finding that more lower class girls have second and third choices than upper class girls.

As mentioned earlier in this section, one of the principal reasons for the differences in patterns of occupational choice due to the three factors of social class, urban-rural residence and high school grades is the fact that the status hierarchy of occupations is a function of the degree of formal educational

TABLE C:14
SOCIAL BACKGROUND CHARACTERISTICS AND SECOND AND THIRD OCCUPATIONAL CHOICES

“C-R-G” Class	N	Percentage of Those Making Second Choices:			Unclass-ifiable and No Job Choice	Total	Percentage of “C-R-G” Class With No Second Choice	Percentage of Those Making Third Choices:			Unclass-ifiable and No Job Choice	Total	Percentage of “C-R-G” Class With No Third Choice
		High Status Occup’n	Medium Status Occup’n	Low Status Occup’n				High Status Occup’n	Medium Status Occup’n	Low Status Occup’n			
1. Professional and High Grades.....	61	42	29	2	27	100	21	40	43	3	13	100	51
2. Professional and Low Grades	55	36	45	9	9	100	20	44	19	6	31	100	42
3. White Collar and High Grades	378	30	47	9	14	100	29	31	39	14	16	100	57
Urban Blue Collar and High Grades ...													
4. White Collar and Low Grades	326	21	54	14	11	100	26	34	34	17	14	100	53
Urban Blue Collar and Medium Grades.													
5. Rural Blue Collar and Farm and.....	314	20	49	20	11	100	32	24	38	17	21	100	62
High Grades.....													
6. Rural Blue Collar and Farm and.....	430	19	47	24	9	100	22	21	44	24	11	100	56
Low Grades	1,013	24	51	14	12	100	27	32	41	14	14	100	58
No response													
Per cent of total	2,577	27	46	13	13	100		33	37	13	17	100	

TABLE C:15
SOCIAL BACKGROUND CHARACTERISTICS AND DEFINITENESS
OF OCCUPATIONAL CHOICE

"C-R-G" Class	N	Percentage of Each "C-R-G" Class Whose First Occupational Choice is:				
		Very Definite	Fairly Definite	Tentative	Unclassifiable and No Job Choice	Total
1. Professional and High Grades	61	12	18	62	8	100
2. Professional and Low Grades	55	24	13	64	0	100
3. White Collar and High Grades	378	25	20	54	1	100
Urban Blue Collar and High Grades.....						
4. White Collar and Low Grades	326	23	20	56	1	100
Urban Blue Collar and Medium Grades						
5. Rural Blue Collar and Farm and High Grades.....	314	25	23	52	0	100
6. Rural Blue Collar and Farm and Low Grades.....	430	22	21	56	1	100
No response.....	1,013	25	21	53	1	100
Per cent of total	2,577	24	21	54	1	100

$$\chi^2 = 9.4; \text{d.f.} = 10; .30 P < .50$$

training required to enter different occupational groups, and the educational plans that girls have after leaving high school differ significantly from class to class. In Table 2:2 in Chapter II we showed the relationship between social class and educational plans after high school. In Table C: 17 we have amalgamated the three factors of social class, urban-rural residence and high school grades in order to show their combined effect on educational plans after high school.

A comparison of this table with Table 2: 2 shows that the addition of the factors of urban-rural residence and high school grades increases the differences in patterns of occupational choice between the various social classes. The general pattern that emerges when treating each of these variables separately is represented in Table C: 17 in an even clearer way. It will be seen that the proportion of girls who are uncertain about their educational plans after high school is much larger for the lower "C-R-G" classes than for the higher classes, which is the opposite of that which occurred with respect to occupational choice. The fact that categories 4 and 6 have a higher proportion in this category than either of categories 3 and 5 respectively suggests that it is low high school grades that is the cause of the high degree of uncertainty of girls in the two former classes.

TABLE C:16
SOCIAL BACKGROUND CHARACTERISTICS AND THE
STATUS OF DISCARDED OCCUPATIONAL CHOICES

Ratio: $\frac{\text{No. of Discarded Choices}}{\text{No. Having Discarded Choices}}$

"C-R-G" Class	High Status Occup'n	Medium Status Occup'n	Low Status Occup'n	Percentage of Each "C-R-G" Class with No Choices Discarded	Mean Number of Discarded Choices per Person in Each "C-R-G" Class
1. Professional and High Grades .....	.25	.96	.28	28	1.5
2. Professional and Low Grades .....	.18	1.39	.22	18	1.8
3. White Collar and High Grades .....	.29	1.19	.40	13	2.4
Urban Blue Collar and High Grades ..					
4. White Collar and Low Grades .....	.20	1.31	.45	12	2.0
Urban Blue Collar and Medium Grades					
5. Rural Blue Collar and Farm and High Grades .....	.16	1.29	.42	11	1.9
6. Rural Blue Collar and Farm and Low Grades .....	.17	1.28	.50	10	2.0
Per cent of total .....	.21	1.26	.43	12	2.0

TABLE C:17
SOCIAL BACKGROUND CHARACTERISTICS AND
EDUCATIONAL PLANS AFTER HIGH SCHOOL

"C-R-G" Class	N	Percentage in Each "C-R-G-" with Different Educational Plans After High School:				
		University	Vocational School	No Further Education After High School	No Plans for Further Education	Total
1. Professional and High Grades	61	80	13	5	2	100
2. Professional and Low Grades	55	56	35	4	6	100
3. White Collar and High Grades	378	41	37	16	6	100
4. White Collar and Low Grades	326	26	42	18	14	100
Urban Blue Collar and High Grades						
5. Rural Blue Collar and Farm and High Grades	314	25	51	16	9	100
6. Rural Blue Collar and Farm and Low Grades	430	10	50	28	12	100
No response	1,013	26	45	19	10	100
Per cent of total	2,577	27	44	19	10	100

$X^2 = 205.6$; d.f. = 10; $P < .001$

In Table C: 18, we have combined the factor of educational plans after high school with the "C-R-G" index and calculated the proportion of each class who plan to enter each of the three classes of occupation. This table shows that, even though girls with different social background characteristics have different educational plans after high school and therefore choose occupations with different status patterns, this factor does not account for all of the difference in occupational choice between these social class groups.

TABLE C:18
SOCIAL CLASS AND OCCUPATIONAL CHOICE WITH EDUCATIONAL PLANS AFTER HIGH SCHOOL CONTROLLED

"C-R-..." Class	Educational Plans After High School	N	Percentage Choosing:				Total
			High Status Occup'n	Medium Status Occup'n	Low Status Occup'n	Unclassifiable and No Job Choice	
1. Professional and High Grades	University	49	59	31	2	8	100
	Vocational Training	8	0	88	13	0	100
	No Further Educational Training	3	0	67	0	33	100
2. Professional and Low Grades	University	31	55	45	0	0	100
	Vocational Training	19	5	90	0	5	100
	No Further Educational Training	2	0	50	50	0	100
3. White Collar and High Grades Urban Blue Collar and High Grades	University	156	44	48	1	6	100
	Vocational Training	139	8	86	4	0	100
	No Further Educational Training	60	7	70	23	0	100
4. White Collar and Low Grades Urban Blue Collar and Medium Grades	University	84	42	55	1	1	100
	Vocational Training	137	4	87	9	0	100
	No Further Educational Training	58	7	57	35	2	100
5. Rural Blue Collar and Farm and High Grades	University	78	36	63	1	0	100
	Vocational Training	159	3	89	4	2	100
	No Further Educational Training	50	0	70	28	0	100
6. Rural Blue Collar and Farm and Low Grades	University	41	42	59	0	0	100
	Vocational Training	216	2	78	19	1	100
	No Further Educational Training	120	3	48	48	0	100
No response		1,167	15	69	13	2	100
Per cent of total		2,577	16	69	13	2	100

X² = 632.5; d.f. = 51; P < .001

APPENDIX D – CHAPTER III

- 1. Method used to construct “Intrinsic-extrinsic” Values Scale**
- 2. Method used to construct the Four Self-image Characteristics**

1. Method used to construct "intrinsic-extrinsic" values scale

We began with the first six of the following groups of values (the titles of which we have abbreviated). The seventh was added because we saw these occupational values as overlapping to some extent the self-family-society values and, since items three and four are similar to the self-benefiting and family-benefiting values respectively, we added item seven to correspond to the society-benefiting value. In addition, whereas in the previous questions our respondents had been asked to choose between pairs of items, in these questions they were asked to indicate the degree of importance attached to each value separately, and the inclusion of some items which were the same in both, enabled us to compare the two different kinds of responses of our subjects.

1) Creativity

"A job which will permit me to be creative and original."

2) Self-fulfilment

"A job for which I have special abilities and aptitudes, where I can develop and excel."

3) Self-pleasure

"A job in which I can travel and work in exciting places."

"A job in which I would be looked up to by other people in the community."

"A job in which I work in pleasant surroundings."

4) Security

"A job which will enable me to look forward to a stable, secure future."

"A job which pays well."

5) Inter-personal relations

"A job in which I meet interesting clients and work with the kind of people whose company I enjoy."

6) Family

"A career in which I can always be sure of finding a job if I need to provide extra money for my future family."

"A job that doesn't interfere with my marriage plans."

"A job in which I meet many pleasant young men, the type I might like to marry."

7) Society

"A job in which I can help people who are faced with human problems or suffering."

The matrix of the coefficients revealed the following relationships between the seven groups of values:

- (a) although the questions for inter-personal relations and society both involved "working with people", they tend to be negatively associated ($\phi = .12$);

(b) although wanting "a job which pays well" is associated with the other index of security "a job which will enable me to look forward to a stable, secure future" ($\phi = .28$); the former is much more highly associated with security as represented by the item: "a career in which I can always be sure of finding a job if I need to provide extra money for my future family" ($\phi = .46$). Wanting a job with good pay on the other hand, is more closely associated with the statement "a job in which I work in pleasant surroundings" ($\phi = .31$) which, in turn, is associated with "a job in which I meet interesting clients and work with the kind of people whose company I enjoy". In other words, the inter-personal relations item is associated with the self-pleasure items, while on the other hand, the security items appear to be more closely related to the family group. This suggests then that it might be more useful to combine the inter-personal relations item with the self-pleasure ones and to combine the security and family classes into another, so that we have two dimensions which may be characterized "self-pleasure" and "family and security".

(c) Although there is a fairly close relationship between the "creativity" and "self-development" values ($\phi = .26$), it is interesting to note that those girls who value self-fulfilment but not "creativity", tended to also value family and security, while girls who had the opposite configuration, tended even more strongly *not* to value family and security.

The discrepancies between our original groupings of values that we developed to explain differences in occupational choice and those suggested by the data, led us to conceptualize the following three dimensions:

- 1) Society-benefiting, family-benefiting and self-benefiting (self-pleasure) values.
- 2) Security values vs. self-fulfilment values.
- 3) High vs. low intrinsic values.

Since we wished to distinguish between self-pleasure and self-fulfilment values at this point, we redefined the self-values in the first dimension above in terms of self-pleasure, because the items that we used to measure this turned out on inspection to fit the classification of "self-pleasure values", by which we broadly mean those objectives which are sought primarily in order to provide enjoyment or pleasure to the individual. "Self-fulfilment values" on the other hand refer to the goal of utilizing one's capacity or abilities to the fullest extent, involving a desire for achievement and self-development. By the term "intrinsic values" we mean desiring a job for its own sake, because the work is attractive to the individual, and we used the item "a job which will permit me to be creative and original" for this dimension.

During the analysis of the relationship between the two dimensions of security-self-fulfilment values and intrinsic values, it was noticed that items which represent these values were also included in the pairs of values between which the girls were asked to choose the more important. The following are the two

pairs in question, against which we have placed the name of the appropriate value :

- 14)#i. A job which will permit me to be creative and original.

“Creativity” (intrinsic)
- #ii. A job which will enable me to look forward to a stable, secure future.

“Security” (extrinsic)
- 15) #i. A job for which I have special abilities and aptitudes, where I can develop and excel.

“Self-fulfilment” (intrinsic)
- #ii. A job in which I meet interesting clients and work with the kind of people whose company I enjoy.

“Self-pleasure” (extrinsic)

There are four possible response patterns to these pairs as follows :

	14) #1 High Creativity (intrinsic)	14) #2 High Security (extrinsic)
15) #1 High self-fulfilment (intrinsic)	1	2
15) #2 High self-pleasure (extrinsic)	3	4

A person choosing “creativity” and “self-fulfilment” over their respective alternatives (cell 1 above) would be regarded as being high on intrinsic values, while someone preferring “security” and “self-pleasure” over the others (cell 4 above) would be classed as being on the other end of the scale, as high on extrinsic values. Both of the other cells 2 and 3 above, involve mixed choices of intrinsic-extrinsic values and therefore fall somewhere in between these two extremes of the intrinsic-extrinsic continuum. Inspection of the distribution of respondents among these four categories suggested that, for the purpose of constructing an intrinsic-extrinsic scale, cell 3 could be omitted, since it contained the lowest proportion (10 per cent) of the four in terms of the girls who choose this combination. This procedure enabled us to convert the two value dimensions into one, which constitutes a scale from high intrinsic to high extrinsic values.

2. Method used to construct the four self-image characteristics

The interrelationships between the twelve self-image items included in the questionnaire are shown in the following Table D:1:

TABLE D:1
SELF-IMAGE: MATRIX OF ϕ COEFFICIENTS
 Questionnaire columns

	63	64	65	66	67	68	69	70	71	72	73	74
63		.09	.08	.20	.13	.19	.10	.09	.13	.17	.19	.09
64			.26	.07	.05	.03	.25	.06	.13	.19	.06	.16
65				.08	.09	.06	.15	.16	.11	.27	.07	.24
66					.05	.20	.07	.12	.11	.18	.13	.13
67						.08	.10	.13	.10	.05	.16	.08
68							.09	.06	.13	.16	.09	.11
69								.26	.07	.20	.14	.39
70									.17	.16	.13	.27
71										.18	.15	.07
72											.11	.21
73												.07
74												

The above table suggests the following four clusters of items:

1) *"Organizational Competence"*

Item 69: "Always has her life well-organized"

Item 70: "Like hard work more than most other people do"

Item 74: "An exceptionally efficient person"

2) *"Inter-personal Competence"*

Item 63: "At ease when meeting strangers"

Item 66: "Someone to whom others frequently look for help and advice"

Item 68: "Able to give orders"

3) *"Self-confidence"*

Item 64: "Very feminine"

Item 65: "Very intelligent"

Item 72: "Adaptable and able to do many things well"

4) *"Self-discipline"*

Item 67: "Dislike taking orders from others"

Item 73: "A person who can control her emotions in upsetting situations"

It will be noted that there is some degree of association between the four clusters. This is probably due to the fact that, since the responses were not the result of girls having to choose between alternatives, but only represent the girls' opinions as to whether she possessed each characteristic, the respondents had to provide for themselves the criteria for deciding which statements described them and which did not. It was therefore possible for some girls to say consistently throughout the list: "Yes, this statement does describe me" or "No, this statement does not describe me". The most marked association is that between the "organizational competence" and "self-confidence" clusters, and we suspect that these items involve somewhat similar dimensions.

APPENDIX E – CHAPTER IV

Relationship between Mother's Occupation and Daughter's Occupational Choice

Relationship between mother’s occupation and daughter’s occupational choice

It is to be noted that when one compares the over-all distribution of occupations of mothers with the occupational aspirations of their daughters, there is a distinct upward shift in terms of the status of the occupation chosen by daughters. It should be pointed out of course, that the distribution of mothers in the various occupational status categories from high status to low status is affected by the large proportion in the “no occupation” category. However, if we correct for this by calculating the number of mothers in each of the first five categories as a proportion of those for whom we have an occupation, the appropriate comparison is as follows :

TABLE E:1¹
STATUS OF MOTHER’S OCCUPATION BEFORE MARRIAGE AND
STATUS OF DAUGHTER’S OCCUPATIONAL CHOICE

Status of Occupation	Mother’s Occupation Before Marriage	Daughter’s Occupational Choice
	%	%
High Status Occupations	4	16
Teaching.....	18	24
Nursing	7	21
Other Medium Status Occupations.....	19	24
Low Status Occupations.....	52	13
No Job Choice	—	3
Total	100	100

¹A similar picture emerges when we compare father’s occupation with daughter’s occupational choice.

Status of Occupation	Father’s Occupation	Daughter’s Occupational Choice
	%	%
High Status Occupations	7	16
Medium Status Occupations	36	69
Low Status Occupations	57	13
No Job Choice	—	3
Total	100	100

A substantially smaller proportion of daughters plan to enter the low status jobs their mothers had before marriage, while the proportion of daughters aspiring to medium and high status jobs is much higher than the percentage of mothers who had these kinds of jobs. The picture with respect to nursing is also extremely marked. A considerably higher proportion of daughters choose nursing as a career than did their mothers.

Reverting to Table 4:2 in Chapter IV it is noted that, by and large, the proportion of daughters choosing high status occupations varies with the mothers' occupations, such that the higher the status of the mother's occupation the greater the proportion of daughters who aspire to high status jobs. Next, with respect to mothers who had high status occupations or were teachers or nurses, their daughters are most likely to choose similar occupations respectively. However, the daughters of mothers who had medium status occupations are more likely to choose high status occupations and the daughters of mothers with low status occupations are more likely to choose medium status jobs than those in any of the other categories. In other words, in the case of mothers who had relatively high status occupations their daughters aspire to occupations of similar status, while daughters of mothers who had low status occupations aim for higher status jobs than their mother had. This can be seen a little more clearly perhaps in Table E:2 where we have combined the three middle status categories into one.

TABLE E:2
STATUS OF MOTHER'S OCCUPATION BEFORE MARRIAGE AND
STATUS OF DAUGHTER'S OCCUPATIONAL CHOICE

Daughter's Occu- pational Choice	Percentage of				
	High Status Occupations	Medium Status Occupations	Low Status Occupations	No Job Choice	No Response
High Status Occupations	34	26	13	11	16
Medium Status Occupations .	55	65	69	73	63
Low Status Occupations	9	7	15	13	18
No Job Choice	0	2	2	1	2
No response	1	2	1	1	1
Total and per cent of mothers in each occu- pational class	100(2)	100(21)	100(25)	100(39)	100(14)

$\chi^2 = 91.4$; d.f. = 9; $P < .001$

APPENDIX F

Attitudes of Different Groups of Girls towards Specific Characteristics of Nursing

APPENDIX F
ATTITUDES OF DIFFERENT GROUPS OF GIRLS TOWARDS SPECIFIC CHARACTERISTICS OF NURSING

Predominant Social Background Charac- teristics of Girls Choosing Occupations of Different Statues	Status of Occupation Chosen	Modal Values Held	Self-Image	Occupations Chosen	Summary of Attitudes Towards Characteristics of Nursing
Urban, Upper Class Girls, with High School Grades	High Status Occupations	Intrinsic (Creativity and Self- Develop- ment)	Society> Family and Self	Nursing (University School of Nursing)	1. a) These girls do not see the actual work involved in nursing as satisfying to them as middle class girls do. b) These girls are less interested than middle class girls in having a job which offers them security. c) Generally speaking, girls who want social service occupations are less interested in the income received than other girls. Girls in university schools of nursing are therefore less likely to have criticisms about this aspect of nursing. d) These girls are more likely than middle class girls to see one of the negative characteristics of nursing as being its low prestige. e) These girls value the training they receive at university schools of nursing more than those attending hospital schools. f) We suspect that these girls find the discipline and lack of freedom involved in nursing a more unattractive charac- teristic of this occupation than middle class girls do, although our data are inconclusive in this respect.

APPENDIX F (Cont'd.)

Predominant Social Background Characteristics of Girls Choosing Occupations of Different Statuses	Status of Occupation Chosen	Modal Values Held	Self-Image	Occupations Chosen	Summary of Attitudes Towards Characteristics of Nursing	
Urban, Upper Class Girls, with High School Grades	High Status Occupations	Intrinsic (Creativity and Self-Development)	Society > Family and Self	Lack of Self-Control	2. a) These girls do not see the actual work involved in nursing as satisfying to them as middle class girls do. b) These girls are less interested than middle class girls in having a job which offers them security. 3. c) Because this group of girls is not particularly enthusiastic about the kinds of work performed by nurses, they do not value the training received as much as others. d) Like other upper class girls choosing high status occupations, they tend to see nursing as having low prestige. e) They do not like the irregular hours and shift work involved in nursing. f) A lower proportion feel that other nurses will be congenial. g) They are more negatively inclined towards the degree of discipline and lack of freedom in nursing. h) The objection to nursing most frequently given by these girls is the fact that they would find the atmosphere of sickness and death unpleasant and upsetting and they do not see themselves as being able to cope with these experiences.	
			Family or Self > Society	Occupational and Physiotherapy Social Work Missionary		
			Other High Status Occupations, e.g., Dietitian, Artist, Journalist			
In addition, girls in group three are 1) not particularly interested in having a job in which they are involved in helping people, and 2) many of them regard nursing as requiring too much self-sacrifice.						
Upper Class Girls with Low High School Grades	Medium Status Occupations	Midway Between Intrinsic-Extrinsic (Self-Development and Security)	Self-Control	Nursing (Hospital Schools of Nursing)	4. These girls have the most favourable attitudes towards nursing. The most frequently mentioned characteristic of nursing that is said to be unattractive by girls in this group, is that of the unpleasant odours and sight of blood. However, these girls believe that they have the kind of personality that enables them to cope with these experiences.	
Middle Class Girls						
Urban, Lower Class Girls with High Grades						

APPENDIX F (Cont'd.)

Predominant Social Background Characteristics of Girls Choosing Occupations of Different Statuses	Status of Occupation Chosen	Modal Values Held	Self-Image	Occupations Chosen	Summary of Attitudes Towards Characteristics of Nursing
Upper Class Girls with Low High School Grades, Middle Class Girls, Urban, Lower Class Girls with High Grades	Medium Status Occupations	Midway Between Intrinsic-Extrinsic (Self-Development and Security)	Society > Family and Self	Lab and X-ray Technician Teaching	5. a) These girls are not quite as anxious as girls choosing nursing to have a job which is important to society and which helps people in need. b) They are less concerned with that work entailed in their occupation be challenging and interesting and are more likely to evaluate an occupation in terms of the extent to which it is instrumental in securing other objectives for them. c) These girls are less inclined to see attractive features in nursing and more likely to place importance on the negative features of this occupation. d) They are less likely to value the training received. e) A substantial proportion dislike the irregular hours and shift work involved. f) A higher proportion of these girls as compared to those choosing nursing see the income of a nurse as inadequate. g) A fair number of the girls in this group regard the discipline and lack of freedom as an unattractive feature of nursing. h) The evaluation of the congeniality of other nurses is somewhat lower among girls in this group. i) Again, the most frequently mentioned negative feature of nursing is the fact that it entails emotionally upsetting experiences involved in caring for the sick and injured and they do not feel they have the ability to cope with such situations. This view is held by a substantial number in both groups, although the proportion of girls choosing non-medical occupations who have this attitude is greater than for those who plan to enter one of the medical professions.
			Family or Self > Society	Other Medium Status Occupations, e.g., Secretarial Work and Airline Stewardess	

APPENDIX F (Cont'd.)

Predominant Social Background Characteristics of Girls Choosing Occupations of Different Statuses	Status of Occupation Chosen	Model Values Held	Self-Image	Occupations Chosen	Summary of Attitudes Towards Characteristics of Nursing
Lower Social Class Girls with Low High School Grades	Low Status Occupations	Extrinsic (Security and Self-Pleasure)	Society > Family and Self Family or Self > Society	Self-Control Lack Self-Control Practical Nurse Other Low Status Occupations, e.g., Sales Clerk, Typist and Office Work, Beautician	j) In addition, girls in group six, because they are less concerned to have a job which is important to society, are more likely to see nursing as requiring too much self-sacrifice.
					7. a) For these girls, an occupation appears to be less important than it is for girls choosing higher status jobs. Two of the reasons for this are: 1. except for those choosing practical nursing, they are less interested in having a job which is important to society and helps people in need; 2. for all groups, the nature of the work involved in a job is not as important as the other benefits an occupation offers; ¹
					b) Girls in these three groups are therefore more likely to see nursing as involving too much self-sacrifice. c) A greater number dislike the irregular hours and shift work that nurses have to contend with.

¹In case this appears to imply a negative evaluation of these objectives on the part of the writer, perhaps it should be mentioned that this approach to the choice of an occupation may be the result of a realistic perception on the part of this type of girl of the kind of occupation that she can reasonably expect to secure. It is of course quite possible that, if these girls saw themselves as having both the opportunity and ability to have a job that they would find interesting in itself, that they would use this as a criterion for selection.

- d) A much lower proportion of these girls think nurses would be congenial.¹
- e) To lower class girls, the discipline and lack of freedom involved in nursing are also more likely to be seen as negative features than they are by girls from the middle class.
- f) Like girls in all of the other groups discussed above, the most frequently cited negative characteristic of nursing is the matter of the unpleasant emotional experiences associated with caring for the sick and injured; while a substantial proportion of the girls choosing practical nursing feel that they would be able to exercise self-control in such circumstances, nevertheless this proportion is still less than it is for those planning to become registered nurses. Among those choosing neither of these occupations, the proportion who indicate that this is an important reason for disliking nursing is much greater.
- g) Lower class girls see other barriers to entering the nursing profession, such as the length and difficulty of the training period in nursing school, and their own abilities which they tend to evaluate less highly than other girls.
- h) Since lower class girls tend to get married at an earlier age than girls in other social classes, a greater number of this group feel that becoming a nurse would interfere with their marriage plans.
- i) On the other hand, girls in this group see nursing as having more prestige than other girls do.

¹Since a lower proportion of girls from both upper and lower social classes regard nurses as congenial as compared with girls from the middle class, it would appear that evaluations of the congeniality of girls in the work situation are based upon the social class characteristics of the girls.

APPENDIX F (Concluded)

Predominant Social Background Charac- teristics of Girls Choosing Occupations of Different Statuses	Status of Occupation Chosen	Modal Values Held	Self-Image	Occupations Chosen	Summary of Attitudes Towards Characteristics of Nursing
					j) Finally, attitudes to income among girls in these groups vary considerably. Among those choosing practical nursing and those planning to become sales clerks, the vast majority regard a nurse's income as adequate. However, among girls choosing an office worker's career or that of a beauty specialist, the number who hold this view is much lower.

In all groups, there are some girls who are not primarily interested in having a job that is important to society and concerned with helping people in need. This is particularly true of lower class girls of whom only about one-third desire this kind of job; on the other hand, about one-half of the upper class girls and between one-half and two-thirds of the middle class girls want occupations which are primarily concerned with providing assistance to people who need it. In contrast, the perceptions of nursing (as distinct from the evaluations of it) are much the same for all girls. The characteristics of nursing which are perceived by almost every girl, are, that it is: a job which is important to society and a job that is primarily concerned with helping people in need. In addition, these characteristics of nursing are very important reasons why girls choose this occupation. On the other hand, almost all girls see nursing as having unattractive features too (even girls who plan to enter this profession), although the extent to which nursing is seen to have such negative features varies among different types of girls. Girls who plan to become nurses clearly see the attractive features of nursing as outweighing the unattractive ones, but those girls who do not value particularly highly the two principal characteristics of nursing are likely to see considerably less on the positive side to outweigh the disadvantages they see in this occupation. In order to make nursing more attractive to this latter group of girls it would therefore seem necessary to do one or both of two things:

- 1) Either to persuade them that there are considerable satisfactions to be obtained from having a job that is important to society and that helps people in need, or to convince them that nursing mediates various objectives, including the ones that they have. This latter may be accomplished by pointing out certain advantages of nursing as it is at present defined, or it may require some modification of the role of the nurse.

- 2) To persuade them that the disadvantages they see in nursing at present are not typical of nursing. It may be possible to achieve this either by changing their perceptions of themselves or their perceptions of nursing where they are in error, or by eliminating those characteristics of the profession that are negatively valued.

Since girls with different social backgrounds have different occupational objectives and also tend to regard nursing as having different negative features, we will present our suggestions as to what can be done to increase the number of girls who choose nursing as a career, and indicate which kinds of girls we think would be most significantly affected by each proposal, and why.

We will first discuss the question of the policies that might be followed which would increase the number of girls who see important attractive features in nursing and then suggest ways in which the number of negative characteristics could be reduced.

A. UPPER CLASS GIRLS, CHOOSING HIGH STATUS OCCUPATIONS

Generally speaking, upper class girls are anxious to have an occupation in which the work is interesting and challenging. An occupation is probably more

important for these girls than for others because it gives them status. They tend to marry later than lower class girls and therefore anticipate spending a longer period of time in their occupation. They appear to be less concerned about the amount of income they will receive from their job and much more concerned with the satisfaction they will get from the type of work they perform. An important factor therefore, that leads girls in this group not to choose nursing, is the perception that the work involved in this profession would not be sufficiently interesting or challenging to them, and would not provide them with opportunities for creativity and originality. They tend to see nursing as requiring less ability than they have and to take such a job would not be appropriate for them. These attitudes also affect their evaluations of the training period in nursing school.

We would suggest therefore that a larger number of upper class girls would find nursing attractive if they could be made to feel that there is a possibility of being able to do the kind of work which they would find interesting. Presumably, the present trend to raise the academic standards required for admission to nursing schools would tend to create a more favourable image of the profession among upper class girls. However, this policy is also likely to reduce the number of girls from other social classes who choose nursing. The wiser course it seems would be to allow for greater differentiation within the nursing profession so that it will be seen as an occupation which allows girls with different objectives and different abilities to satisfy their different requirements. Upper class girls are probably deterred from choosing nursing as a career by their perceptions of the role of the nurse as being mainly concerned with hard physical work, a considerable part of which is routine and undemanding of their special skills. They also see a nurse as being subject to too much discipline and regimentation which restricts their development as independent persons.

The question of the way in which the role of the nurse could be differentiated so as to be more attractive to these girls is too complex to discuss here in detail; however, from the point of view of recruiting girls of this type, it seems to us that administrative or supervisory positions which entail a greater amount of responsibility, less supervision, more freedom in decision making, as well as positions which require more technical knowledge and intellectual ability, would be more attractive. To the extent that nursing has such opportunities at the present time,¹ it would be useful to make these more commonly known among these girls.

B. LOWER CLASS GIRLS CHOOSING LOW STATUS OCCUPATIONS

These girls are both less likely to want a job which is primarily social service in character and more likely to have lower high school grades. However, there is still about one-third for whom a social service type occupation would be

¹ The author recalls an interview with a director of a school of nursing who informed him that, although she had completed her nursing training some eleven years ago, she had performed bedside nursing duties for less than three years; the remaining time had been spent obtaining further postgraduate training and filling administrative positions.

attractive, and a substantial proportion who have as much academic ability as girls who want to become nurses (approximately 42 per cent have grades of 60 per cent or above, while 25 per cent have grades of over 70 per cent).¹ Lower class girls are more likely to evaluate a job in terms of the extent to which it provides them with benefits other than those resulting from the actual work involved. It would seem therefore that an emphasis on nursing as involving pleasant surroundings, enjoyable work, relatively high income, plenty of spare time and so on, would be the most effective approach to make nursing appear more attractive to this group of girls. Again, this may require some modification of the role of the nurse or the creation of some speciality within the general area of nursing which would enable these benefits to be offered.

C. MIDDLE CLASS GIRLS CHOOSING MEDIUM STATUS OCCUPATIONS

Just over one-third of this group are not particularly interested in having a social service occupation. Since middle class girls tend to fall between upper and lower class girls in terms of what they want out of an occupation, attempts to attract girls from each of these last two classes would probably similarly affect different groups within the middle class. In addition, it seems to us that nursing as it is at present perceived is most likely to be regarded positively by this type of girls and the elimination of the negative features seen by middle class girls would probably have the desired effect of increasing the number who choose nursing.

Let us now turn to those aspects of nursing that different kinds of girls find unattractive.

First of all, the vast majority of girls perceive nursing as involving unpleasant situations which are emotionally upsetting; in particular, the general atmosphere of sickness and death that is always present in a hospital, the sight of blood associated with the serious injury and so on. While some girls see themselves as being able to cope with such situations, two out of three girls do not think they have this ability and in our judgment this is probably the most important deterrent to the choice of nursing.

In the circumstances, it seems to us that a greater number of girls would find nursing more attractive if they could be persuaded either that their evaluation of their ability to handle such situations is incorrect or that nursing does not necessarily involve such situations. With regard to the first suggestion, we are

¹ It is significant to note that over 20 per cent of the girls in our sample who had high school grades of 70 per cent or over neither plan to go to university nor to obtain any vocational training after leaving high school. In addition, almost 30 per cent of the girls with grades between 60 per cent and 70 per cent do not plan any further training at all after high school. This clearly indicates that there is a substantial number of girls who are capable of being trained for jobs requiring more skill and academic ability but who, for various reasons, will not receive this training; in other words, there is a substantial pool of girls whose abilities are not being used to the full. From the point of view of increasing the supply of nurses, we can therefore see that there is a supply of girls who have sufficient ability to become nurses, but who, at the moment, are planning to take jobs which require less ability than they possess.

not in a position to estimate what proportion of the girls who said that they would not be able to cope with emotionally upsetting situations involved in nursing, were wrong in their judgment of themselves, but it would not appear to be a difficult task to find this out. We suggest that it would also be possible to make nursing more attractive to girls who do not have the degree of self-control necessary to handle the unpleasant experiences associated with nursing, by pointing out the existence of different types of nursing which do not as frequently entail such situations or to reallocate the functions of nursing in such a way as to create types of nursing roles that could be satisfactorily filled by these girls.

In addition to this important negative aspect of nursing there are others that affect a somewhat smaller number of girls from different social classes.

1. Irregular Hours and Shift Work

About one-third of the girls who do not choose nursing have negative attitudes towards this aspect of nursing and almost one-fifth give this as one reason for not choosing this occupation. It is a greater drawback in the eyes of lower class girls than for those from other social classes.

2. Inadequate Income

Generally speaking, those who are anxious to have social service occupations do not appear very interested in having a high income and are not therefore very critical of the income that they think nurses receive. A greater proportion of those choosing non-social service occupations in all social classes regard a nurse's income as inadequate. However, only about 5 per cent of our sample said that this was an important reason for disliking nursing.

3. The Prestige of Nursing

Girls from upper social classes regard the prestige of this occupation as being low while those from the lower social classes see it as being high. While only a small proportion indicate strong negative feelings about this aspect of nursing, this may be due to a general feeling that one ought not to be concerned with the prestige of an occupation.

4. Too Much Discipline and Lack of Freedom

This is a fairly frequently mentioned negative characteristic of nursing and is more important for both upper and lower class girls than for middle class girls.

5. Congeniality of Nurses

As mentioned earlier, the attitudes towards those in nursing are more negative for both upper and lower social class girls than for middle class girls. It seems to us that probably girls in both of the former social classes see nursing as a middle class occupation and feel that they are less likely to find these girls as congenial as those in their own classes respectively.

6. Nursing School Training as a Barrier

Lower class girls and those with low high school grades are likely to see the three-year training period as a barrier to entering the nursing profession.

7. Interference with Marriage Plans

Lower class girls tend to marry at a younger age than girls from other social classes and in these circumstances nursing is more likely to be seen as interfering with their marriage plans. No doubt the three years of training are an important consideration, since the training delays full entry into an occupation for substantial period of time, and thus postpones the time when a girl abandons the status of a student and begins to earn her own living.

Before concluding this chapter, we will summarize our proposals regarding policies which would be more effective in attracting men into the nursing profession.

With regard to the small number who are favourably disposed towards nursing, it is suggested that an increase in the availability of information concerning the occupation of male nurse would probably increase the number who would plan to enter this profession.

For the larger group who are somewhat less sure about their attitudes towards nursing, we suggest that a significantly larger number would seriously consider entering this profession if changes were made in the definition of this occupational role, such that the boys would perceive this occupation as having more status for a man than it does at the present time. This may be achieved in at least two ways :

1) by a greater differentiation between the roles of female and male nurse so that the kinds of tasks performed by men are not the same as those performed by women. Specifically, men prefer a definition of the male nurse role which is seen as having greater responsibility than that for the female nurse, particularly in the sense that the man is not subject to the orders of women. In addition they would be more favourably inclined towards the job of male nurse if it were seen as involving somewhat more technical kinds of tasks, rather than as requiring men to both exhibit the kinds of interpersonal relations skills and to perform the kinds of services involved in caring for patients that they regard as more appropriate for women. One specific suggestion that might be offered here is that the title of those in this occupation should be changed from "male nurse" to something like "hospital technician" which, as was seen from the data previously presented, has the effect of appearing more attractive to boys even though no definition was provided them of the kinds of duties performed by such a person;

2) by providing a rate of pay and opportunities for advancement that men feel appropriate to a man (for whom an occupation is perhaps seen as being more important than for a woman, both in terms of his perception of what is appropriate for him as a man, and in terms of what he sees as his dependence upon his occupation to fulfil his responsibilities to his future family).

It appears reasonable to us to expect that, if these changes were made, the proportion of boys who would seriously consider becoming male nurses would increase from the present figure of less than 2 per cent to say 25 per cent. (It should perhaps be emphasized that it is not suggested that this large proportion would eventually choose this career). However, it should be pointed out that there is a "hard core" of at least 40 per cent of boys for whom this occupation would not become attractive without a much more radical programme than that proposed here.

One final comment on this chapter. Policy-makers have the unenviable task of serving many masters; they must always choose between competing and even contradictory ends when determining which one to serve. The writer of this study is not a policy-maker and can therefore afford the luxury of pursuing one goal and ignoring others. In this case, our objective has been to increase the supply of nurses and our proposals have been made with this end in view. We have ignored other objectives including the needs of other medical occupations and in fact, the needs of all other occupations; up to this point, we have paid little attention to other objectives of the nursing profession such as the most appropriate allocation of duties within the profession that would serve the functions of nursing most effectively. Many of our suggestions for increasing the number of girls who want to become nurses clearly have implications for these other goals, but we have not regarded our tasks as including that of making choices between such competing objectives.

